

RETIREMENT POLICY

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1.0		Jan Armstrong, Deputy Director of Human Resources	

CITY HOSPITALS SUNDERLAND NHS FOUNDATION TRUST

DOCUMENT APPROVAL PROFORMA

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Name of Sponsor: Kath Griffin, Director of Human Resources

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Mental Health Act

Human Resources X

Control of infection

Drugs policy

Other

Equality Impact Assessment: If this policy has a potential discriminatory impact please record below the person who has informed and involved the sponsor:

Name:

Title:

Date:

NB: It is the sponsor's responsibility to submit the policy through the CHS approval route.

Checklist for the review and approval of the policy

Is the policy compliant with:	Yes/No	Comments
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Committee Approval

Committee which forms the approval process: Policy Committee

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Signature of Chair of Committee, including approval: Mike Davison

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1. INTRODUCTION

- 1.1 This policy sets out the key principles for ensuring staff who are retiring from City Hospitals Sunderland NHS Foundation Trust (the Trust), are aware of the options that may be available to them and that they are given appropriate help and support to prepare for retirement.
- 1.2 The Trust recognises that retirement can be a considerable change in an individual's life, so the measures outlined in this policy are intended to ensure a smooth transition from work to retirement.
- 1.3 The Trust places a high value on the part played by staff in providing services to patients and seeks to ensure that the management of its staff is carried out in accordance with the principles of equality and fairness.
- 1.4 As part of its development, this policy has been reviewed in line with the Trust's Equality Impact Assessment process, the purpose of which is to identify and reduce or, if possible, remove any unfair disproportionate impact of the policy on employees on the grounds of their 'protected characteristics'. In accordance with legislation, the default retirement age has been removed. The Trust has chosen not to have a compulsory retirement age and this, together with the flexibility options available, will enable older staff to have a greater choice and flexibility over the age at which they choose to retire.

2. PURPOSE AND SCOPE

- 2.1 This policy applies to all employees of the Trust and aims to ensure a fair and consistent approach is taken when employees approach their retirement.
- 2.2 This policy does not include retirement on ill-health grounds, which is covered in the Attendance Management Policy.
- 2.3 This policy does not include early retirement on the grounds of redundancy or in the interests of the efficiency of the service, which are subject to the NHS National Terms and Conditions Handbook and the Organisational Change and Pay Protection Policy.
- 2.3 The policy has been developed taking into account the provisions of the Equality Act 2010, which enables employers to have a compulsory retirement age only in limited circumstances where it is a proportionate measure to achieve a legitimate business aim. The Trust considers that it does not currently require a compulsory retirement age for its staff, though this may be reviewed in future. Age related criteria do apply in relation to NHS Pension Scheme benefits.

3. DUTIES

3.1 Board of Directors

The Board of Directors is responsible for monitoring and approving a framework to support retirement arrangements that are compliant with all relevant legislation, guidelines and NHS best practice standards.

3.2 Chief Executive

The Chief Executive has ultimate responsibility for ensuring that retirement arrangements are in place and are compliant with all relevant legislation, guidelines and NHS best practice standards.

3.3 Director of Human Resources

The Director of Human Resources has overall responsibility for the implementation, monitoring and review of the policy.

3.4 Directorate Manager / Head of Service

The Directorate Manager / Head of Service is responsible for the fair application and implementation of the policy within their area. This includes consideration of all flexible retirement retire and return requests.

3.5 Managers

Managers are responsible for:

- Pre-retirement planning with staff, ensuring that they adhere to the principles and processes contained in the policy.
- Consistent and timely application of the policy within their area of responsibility.
- Ensuring staff are aware of the pension and retirement opportunities available to them and where they can get information / advice.
- Considering applications for flexible retirement in a timely way and in line with the policy including seeking advice from HR when doing so.
- Ensuring that staff who are members of the NHS Pension Scheme or NEST Pension Scheme, are aware that if they intend to retire and wish to take their pension benefits, they need to give, wherever possible, at least 4 of their retirement date. This amount of notice, which for most staff is greater than their contractual notice, is to ensure there is sufficient time to process the necessary pension documentation and resolve any queries around this, in time for payment when they retire.
- Recording an employee's retirement date on ESR as soon as this has been confirmed with the employee.
- Checking if the retiring employee is entitled to a long service award and ensuring that the termination is recorded in ESR, so that payment of the award can be made with the employee's final pay.

3.6 Employees

Employees are responsible for:

- Discussing pre-retirement options / raising their intention to retire with their line manager, as part of regular 1:1 meetings and/or during their appraisal.
- Notifying their line manager of their intention to retire at least 4 months before the expected date, so that arrangements can be made by HR to process pension benefits in a timely way and to enable service continuity / succession planning.

3.7 Human Resources

Human Resources staff are responsible for:

- Providing information, advice and support to managers and staff in the practical application of this policy.
- Monitoring applications for flexible retirement, analysing and reporting any trends.
- o Processing retirement applications for submission to NHS Pensions.

Human Resources staff will provide information to staff about the NHS or NEST Pension Schemes, or direct staff as to where to find information, e.g. from NHS Pensions staff, but they are not permitted by law to provide any financial or pensions advice.

4. **DEFINITIONS**

- **4.1 Normal Pension Age (NPA)** is the age at which an employee can retire and draw their pension benefits without any reduction applying. NPA depends on of which NHS Pension scheme / section an individual is a member:-
 - 60 for members of the 1995 Section (55 for Mental Health Officers or those with Special Class status);
 - 65 for members of the 2008 Section:
 - State Pension Age for members of the 2015 Scheme.
- **4.4 State Pension Age (SPA)** is the earliest age at which an individual can claim their State Pension. The State Pension age depends on when an individual was born. More information is available on the government website https://www.gov.uk/new-state-pension.
- **4.5 Flexible Retirement** is defined as flexibility regarding the age at which an employee retires, the length of time an employee takes to retire (sometimes referred to as 'winding down') or the nature and intensity of work in the lead up to final retirement (sometimes referred to as 'stepping down').
- **4.6 Special Class** is the status that applies only to members of the 1995 Section of the NHS Pension Scheme who:-
 - Have worked as a nurse, midwife, physiotherapist, health visitor or occupational health nurse, since 6 March 1995;
 - Not had a break in pensionable employment of 5 years or more;
 - Have had this status for the 5 years leading up to retirement.
- 4.7 Reckonable NHS Service is defined as an employee's previous continuous service with any NHS employer, which counts as reckonable service in respect of NHS agreements on redundancy, maternity, sick pay and annual leave. When employees who had previously been transferred out of NHS employment to a non-NHS provider of NHS services, return to NHS employment, their previous continuous service will be counted as reckonable in respect of NHS agreements on sick pay, annual leave and pay increments.
- 4.8 Early Retirement Reduction Buy Out (ERRBO) is an option that members of the 2015 NHS Pension Scheme have to enter into an agreement to pay additional pension contributions to "buy out" the reduction that would apply if the member were to retire before their NPA. ERRBOs are only available for

early retirement one, two or three years before the member's NPA. Members must make an application for an ERRBO agreement within 3 months of them joining the 2015 scheme. Applications made after this will only be effective from the beginning of the following scheme year.

- 4.9 Late Retirement Factors. Members of the 2008 Section who work beyond age 65 without drawing their pension, have the value of their pension increased by a set amount (known as a late retirement factor) depending on the age they actually retire. Late retirement factors also apply for members of the 2015 NHS Pension Scheme, who work beyond their NPA. More information can be found on NHS Pensions website.
- 4.10 NEST. NEST is the National Employment Savings Trust, which is an occupational pension scheme run on a not-for-profit basis. It ensures that all employers have access to suitable, low-charge pension provision to meet their new duty to enrol all eligible workers into a workplace pension automatically. More information can be found at http://www.nestpensions.org.uk/

5. NHS PENSION SCHEME GENERAL RETIREMENT PRINCIPLES

- 5.1 This section is intended to give brief details about the NHS Pension Scheme. As the scheme is subject to change, the information given may alter over time. Managers and staff should therefore contact Employee Services in HR or visit NHS Pensions' website www.nhsbsa.nhs.uk/pensions to ensure they obtain the most recent information of the relevant section(s) of the NHS Pension Scheme of which they are a member.
- 5.2 When considering retirement options, staff should ensure they find out what the potential impact might be on their occupational pension, (if they are a member of the NHS Pension Scheme or NEST) and their government / state pension. Staff are strongly encouraged to contact the Employee Services Team in the HR Department for information in the first instance as well as to seek advice from an Independent Financial Advisor before making a decision.

5.3 Notice requirements

Employees who intend to retire (at NPA or earlier) and wish to draw down their pension benefits under the terms of the NHS Pension Scheme or NEST Pension Scheme must, wherever possible, give at least 4 months' notice (or their contractual notice if this is greater), of their intention to retire. This is to ensure that the necessary documentation can be processed in time to ensure payment of pension benefits at retirement.

- 5.4 Employees who are not members of the NHS Pension Scheme or NEST Pension Scheme should give their normal contractual notice.
- 5.5 The key retirement principles are as follows:-
 - The Trust does not operate a compulsory retirement age.

- Age related criteria do apply in relation to NHS Pension Scheme benefits, with the normal pension ages for members being as follows:
 - o Age 60 under the 1995 Section
 - o Age 65 under the 2008 Section
 - State Pension Age under the 2015 Scheme.
- The minimum retirement ages for NHS Pension Schemes members are:
 - Age 50 under the 1995 Section (except for those who joined or returned to this scheme after 6 April 2006 for whom the retirement is age 55);
 - o Age 55 under the 2008 Section
 - Age 55 under the 2015 Scheme.
- If early retirement is taken, benefits will be at a reduced level, because they are being paid earlier and for longer than expected.
- Under the 1995 Section of the NHS Pension Scheme, Special Class members can choose to retire at any time from age 55 provided they meet the relevant criteria. Benefits are not reduced in these circumstances.
- Employees considering flexible retirement options must discuss these with their line manager in the first instance to establish the feasibility of their intentions.
- Employees, who become incapable of carrying out their duties on a permanent basis and for whom no reasonable adjustments can be made or suitable alternative employment secured, can apply to NHS Pensions for ill health retirement. Information about this can be found at http://www.nhsbsa.nhs.uk/Pensions/4228.aspx.
- The provisions of Section 16 of the Agenda for Change NHS terms and conditions will apply to employees retiring early on the grounds of redundancy.

6. PREPARATION FOR RETIREMENT

- 6.1 A number of workshops are available for staff to attend covering topics such as Mid-Career Financial Planning, Pension Planning and Pre-Retirement Planning. Details of the workshop dates and content are available on the Trust Intranet or can be obtained by contacting a member of the Training Department on 0191 5656256, ext 42604.
- 6.2 Employees interested in attending should discuss this with their manager in the first instance.

6.3 The NHS Retirement Fellowship is a registered charity that exists to promote the welfare of retired NHS staff. Further information can be obtained through the Fellowship's website at www.nhsrf.org.uk.

7. TYPES OF RETIREMENT

7.1 Age Retirement

Staff who wish to retire from working altogether and take their NHS Pension Scheme benefits, must arrange to meet with their manager to discuss and confirm their plans, wherever possible giving at least 4 months' notice, which for most staff is greater than their contractual notice. This amount of notice is required to ensure there is sufficient time for their pension benefits to be processed for their retirement. Staff will be expected to take all their outstanding annual leave before they retire.

7.2 Voluntary Early Retirement (VER)

Staff who are members of the NHS Pension Scheme can choose to take VER at any time from the minimum pension age applicable to the pension scheme of which they are members, provided they have at least 2 years' membership.

The minimum retirement age is 50 for members of the 1995 Section of the NHS Pension Scheme (or 55 for staff who joined for the first time on or after 6 April 2006, or who previously left the scheme before 31 March 2000 with deferred benefits and re-joined on or after 6 April 2006) and 55 for members of the 2008 Section and 2015 scheme.

7.3 Early Retirement Reduction Buy Out (ERRBO)

This provision, which applies only in the 2015 NHS Pension Scheme, allows members to pay additional contributions into the scheme that will then allow them to retire earlier than their SPA without any early retirement reduction of pension benefits. More information is available on NHS Pensions' website http://www.nhsbsa.nhs.uk/pensions or from the Employee Services Team in HR.

7.4 III Health Retirement

NHS Pension Scheme members who become incapable of carrying out their duties on a permanent basis and no reasonable adjustments can be made or suitable alternative employment secured, may apply for retirement on the grounds of ill health. To be considered for ill health retirement an employee must have:

- At least 2 years' membership of the NHS Pension Scheme and;
- The support for ill health retirement from either the Trust's Occupational Health Physician or their GP/Consultant.

7.5 Flexible Retirement

The Trust recognises the benefits of offering employees, subject to the needs of the service, the opportunity to take one of the flexible retirement options described in this policy. Experienced staff often have a great deal to

offer the Trust later in their careers, particularly in terms of knowledge and skills. In addition to giving staff more choice, flexible retirement can also give managers more time to look at succession and workforce planning issues and make arrangements for continuity of service.

Flexible retirement options are open to all staff. Each request will be considered on its merits taking into account a number of factors including but not limited to:-

- The job role;
- The effect on the operation of the department and service delivery, including the workforce planning issues facing the department and Trust at the time;
- Whether there are staff within the Department, Division or Trust whose posts are at risk who could be considered for all or part of the work;
- The precise provisions of the Pension Scheme of which they are a member, e.g. abatement rules;
- The needs of the service (including any opportunities that arise for service improvement and development).

There may be circumstances when a request cannot be supported and the Trust reserves the right to refuse a request for flexible retirement. Flexible retirement options available under the provisions of the NHS

Pension Scheme are:-

- Pre-retirement wind down (a reduction in working hours);
- Pre-retirement step down (to a less demanding role);
- Retirement and return to NHS employment:
- Draw down (applicable only to 2008 Section and 2015 NHS Pension Scheme members);
- Late retirement (applicable only to 2008 Section and 2015 NHS Pension Scheme members).

More information about the various options is given below. However in all cases, staff should contact the Employee Services Team in the HR Department to find out how their occupational and/or state pension entitlement / benefits might be affected and are strongly encouraged to also seek advice from an independent Financial Advisor.

7.6 Options for staff approaching retirement.

7.6.1 Pre-retirement Wind Down (reduction in working hours)

Staff approaching retirement may wish to gradually reduce the number of hours they work in their current role and work fewer hours up to their actual retirement date. If a reduction in working hours is agreed, the employee will be paid pro rata to the hours worked.

Employees who delay their retirement and continue working part-time carry on building up pension entitlement as pension benefits for part-time staff are calculated on whole time equivalent pay pro-rata to hours worked.

7.6.2 Pre-retirement Step Down (to a less demanding / senior role)

Staff approaching retirement may wish to step down to a less demanding / senior role. A step down can only take place where a vacancy exists or is being considered as part of a service change and the employee is successful in being appointed as part of the normal recruitment process.

Staff who are appointed / step down to a less demanding /senior role on a part time basis will be paid pro rata to hours worked.

Members of the 1995 NHS Pension Scheme who are above the NPA and whose pay reduces by at least 10%, may apply for the pension rights earned at the higher level to be preserved. The application must be made within 15 months of the date the rate of pay is reduced. Staff who wish to find out more about how to do this should contact the Employee Services Team in the HR Department.

7.7 Flexible retirement options are set out below and in **Appendices 1-3**:-

7.7.1 Retire and Return

The NHS Pension Scheme provisions permit employees who have retired or who are due to retire from NHS employment, to take their NHS pension scheme benefits and return to NHS employment. However employees who have retired do not have an automatic right to return to NHS employment and must apply in line with this policy.

Employees who are considering this option and who have NHS Pension Scheme membership prior to 5 April 1997 must contact Employee Services in HR and ask for a Guaranteed Minimum Pension (GMP) test to be carried out before they make a final decision.

If this test is not carried out, the employee could potentially resign from their post and should the GMP test fail, NHS Pensions will not allow the employee to receive early payment of benefits (which could mean they would be left with no income) or to give up the amount of pension they requested to provide an additional lump sum.

More information about this and the potential impact it could have on pension scheme benefits is available from NHS Pensions at: - http://www.nhsbsa.nhs.uk/Pensions/Documents/Pensions/GMP_Facts heet_v3.0_06.2013.pdf

Requests from staff who are considering retiring, are due to retire or who have already retired, to return to NHS employment will be considered in line with the procedure **in Appendix 1**, which will be judged on the basis of service needs and as outlined in the Flexible Working Policy. Re-employment may be offered on a temporary, fixed term or permanent basis, depending on service needs.

Individuals who wish to have more flexibility about when they work may wish to consider applying to NHS Professionals who provide temporary / flexible workers including nurses, healthcare support workers and doctors, to the Trust.

7.6 Draw Down / Partial Retirement (2008 Section and 2015 scheme only)

This option is available only to members of the 2008 Section and 2015 Scheme. It allows members to partially retire and take some of their pension benefits whilst continuing in NHS employment. To do this, employees must be at least age 55 and have reduced their pensionable pay by at least 10%.

Members can take between 20% - 80% of their pension entitlement whilst continuing to build up future membership. Pensionable pay must remain reduced for at least a year; otherwise eligibility to the pension will stop. Benefits can be drawn down twice before final retirement.

7.7 Late Retirement (2008 Section and 2015 scheme only)

Staff who remain in employment beyond the normal retirement age and remain in the NHS Pension Scheme, may continue to earn benefits to age 75 or until they reach 45 years' membership.

There are no provisions to increase benefits for members of the 1995 section if they are paid late, but members of the 2008 section will have any pension earned before age 65 increased to take into account of the fact that it is being paid later than the normal retirement age.

Members of the 2015 scheme will have late retirement factors applied to all pension earned until retirement.

7.8 Re-joining the NHS Pension Scheme after Retirement

Members of the 2008 Section and 2015 NHS Pension Scheme are eligible to re-join the scheme after drawing their pension benefits, up to a maximum age limit of 75 and build a separate pension. More information about this is available from NHS Pensions' at

http://www.nhsbsa.nhs.uk/Pensions/Documents/Pensions/REemployment_Factsheet__V2.pdf.

8. APPEALS

- 8.1 Where an employee has had his/her flexible retirement request refused, he/she may lodge an appeal.
- 8.2 The appeal should be submitted in writing to a more senior manager, within 14 calendar days of receipt of the decision, setting out the grounds on which the appeal is being made.
- 8.3 There are no constraints on the grounds under which an employee can appeal, although the following are given for guidance:

- Procedure a failure to follow procedure had a material effect on the decision:
- Decision the evidence did not support the conclusion reached or is inconsistent with other decisions within the Trust of which the employee is aware.
- New evidence.
- 8.4 An appeal meeting will be arranged, normally within 14 calendar days of receipt of the appeal. The employee may be accompanied by a trade union representative or a work colleague and the appeal panel will be advised by a representative from Human Resources.
- 8.6 Confirmation of the appeal outcome will be given in writing, normally within 7 calendar days of the date of the appeal meeting.
- 8.7 The decision of the appeal panel will be final and there shall be no further right of appeal.

9 RETIREMENT GIFTS AND SCROLL

9.1 Staff who, on retirement, have completed 20 or more years' total NHS service, are eligible to receive a small token of appreciation from the Trust for their loyalty, the value of which is detailed below.

Total NHS Service	Value of Gift
20 - 30 years' service	£100
30 - 40 years' service	£130
40 + years' service	£160

- 9.2 Managers may combine the retirement gift with any contributions from colleagues. Where this is the case, the Directorate Manager / Head of Service should notify the Charitable Trust Funds Administrator in Financial Services so that a gift voucher in excess of the above amounts can be purchased.
- 9.3 When an employee is retiring the Directorate Manager / Head of Service must complete a 'Request for Retirement Gift and Scroll' form (copy available on the Intranet) and send this to Employee Services In HR, so that a retirement scroll and the gift vouchers can be arranged.

10. MONITORING COMPLIANCE AND EFFECTIVENESS

Area for monitoring	Method	Frequency	Responsibility	Monitoring Assurance Group	Lead for developing action plan	Group responsible for monitoring action plan
Number of staff retiring	Workforce Report	Quarterly	Workforce Information Analyst	Executive Committee	Deputy Director of HR	Board of Directors
Number and	Workforce	Quarterly	Workforce	Executive	Deputy Director	Board of

outcome of	Report	Information	Committee	of HR	Directors
flexible		Analyst			
retirement					
applications					

11. DISSEMINATION, IMPLEMENTATION, TRAINING AND REVIEW

- 11.1 A copy of the policy will be published on the HR Policies section of the Trust Intranet.
- 11.2 A copy of the policy will be circulated to HR staff, including the Employee Services Team to enable them to support the implementation of the policy through the development and implementation of standard operating procedures, guidance and relevant update training for staff.
- 11.3 Information to promote awareness of the policy will be included in the Team Brief, which is circulated to all staff.
- 11.4 There is a dedicated Pensions page on the Trust Intranet, which provides a comprehensive range of information for staff about occupational and state pensions and who to contact for further help/support if necessary.

12. CONSULTATION, REVIEW, APPROVAL AND RATIFICATION

- 12.1 Consultation
 - Human Resources Strategy Group
 - Joint Consultative Group
 - Senior Manager Forum
 - Corporate Management Team
- 12.2 Approval
 - Executive Committee
- 12.3 Review
 - The policy will be reviewed every 3 years or earlier in view of developments, which may include legislative changes, national policy instruction (NHS or Department of Health) or Trust Board decisions.
- 12.4 Ratification
 - Policy Committee

13. REFERENCES

- ➤ The Equality Act 2010
- NHS Pension Scheme Regulations / Statutory Instruments http://www.nhsbsa.nhs.uk/2659.aspx
- NHS National Terms and Conditions http://www.nhsemployers.org/your-workforce/pay-and-reward/nhs-terms-and-conditions
- GMC License to Practice and Revalidation Regulations 2012 http://www.gmc-uk.org/doctors/revalidation/9611.asp
- NMC Revalidation Regulations http://revalidation.nmc.org.uk/

14. ASSOCIATED TRUST DOCUMENTS

- Annual Leave Policy
- Attendance Management Policy
- Criminal Background and Disclosure and Barring Checks Policy
- Flexible Working Policy
- Appraisal Policy
- Organisational Change and Pay Protection Policy
- Professional Clinical Registration Policy
- Recruitment and Selection Policy
- Grievance Policy and Procedure
- Medical Staff Job Planning Policy
- Medical Staff Appraisal Policy
- Remediation Policy
- Employment Checks Policy

RETIREMENT PROCEDURE

1. NORMAL AGE RETIREMENT AND VOLUNTARY EARLY RETIREMENT

- 1.1 Employees who are members of the NHS Pension Scheme and who intend to retire and wish to take their pension benefits, must wherever possible, give at least 4 months' of their retirement date to their manager who should then acknowledge this and record it in ESR. This amount of notice required, which for most staff, is greater than their contractual, is to ensure there is sufficient time to process the relevant pension documentation and resolve any queries around this, in time for payment when they retire.
- 1.2 Manager should ensure that staff who are due to retire have taken all outstanding accrued annual leave before they retire. See also Section 5 of the Trust's Annual Leave Policy for information about this.
 - 1.3 Employees who are intending to retire / leave the Trust's employment, who are not members of the NHS Pension Scheme or NEST Pension Scheme members should give their normal contractual notice.
 - Staff who are members of the NHS Pension Scheme can view their current and projected annual pension statement in their Total Reward Statement (TRS) on ESR. Information on how to do this is at http://chsintranet/corporate-functions/human-resources/employmentservices/total-reward-statements. Staff who encounter problems in viewing their TRS should contact Employee Services in HR in the first instance who will be able to help,

2. FLEXIBLE RETIREMENT AND RETURNING TO WORK

- 2.1 Requests for flexible retirement and returning to work (referred to in the NHS Pension Scheme as 'retire and return') are at the Trust's discretion. Before agreeing to this request, the manager must determine whether the post is required to meet service needs and if so, submit and have approved a Recruitment Authorisation Form in respect of the relevant post.
- 2.2 A return to work would normally only be agreed in the following circumstances:
 - Shortage of skills;
 - Shortage of experience, or;
 - Difficulty to recruit a replacement.
- 2.3 The employee must take a break in NHS employment of a minimum of 14 days. Should the employee have more than one concurrent NHS post, the employee must leave all existing NHS contracts for the minimum period.
- 2.4 Where an agreement is reached to re-employ an individual following their retirement, the employee will be issued with a new contract of employment to commence following the break described in 2.7 below.

- 2.5 This break in service means that on re-employment to the NHS an employee will need to work a minimum of 2 years to accrue their statutory employment rights under the Employment Rights Act 1996 and a minimum of 104 weeks continuous service to be eligible for both statutory and occupational redundancy payments. This break does not affect entitlements to occupational sick pay and contractual annual leave under NHS Terms and Conditions.
- 2.6 This break in service is different from / separate to the breaks, which are described in the NHS Pension Scheme and that must be taken to avoid NHS Pension Scheme payments being suspended or abated. For completeness, these are as follows:-
 - Members of the 1995 section must take a 24-hour break before returning back to employment and work 16 hours or less a week in the first calendar month.
 - Members of the 2008 section who have taken all their pension entitlement must take a 24-hour break.
 - Members of the 2015 scheme who have taken all their pension benefits must take a 24-hour break.
- 2.7 If an employee has previously been given pension benefits, any employment that has been taken into account for the purposes of those pension benefits, will not count as reckonable service for the purposes of NHS redundancy pay or future pay protection.
- 2.8 Following the required break in service and where the employee is reemployed at the Trust within one month of their retirement date, the total hours worked in all NHS contracts must not exceed 16 per week. This restriction will apply until one calendar month has elapsed, counted from the date immediately following the retirement date.

An example is shown below:

- Employee retires / last day of service: Sunday 16th March;
- Break in service: Monday 17th March to Sunday 30th March inclusive;
- Restriction to 16 hours per week applies: Monday 31st March to Wednesday 16th April inclusive.
- Following the restricted period of working and subject to the requirements of the service, an employee may agree to increase their hours worked. However if the employee had "special class" NHS Pension Scheme membership, this may affect the amount of pension they continue to receive. If an employee retires with special class status, they should seek further details from the Employee Services Team in the HR Department before agreeing to any such arrangement.

- 2.9 Retired staff who are re-employed by the Trust will be subject to the following pre-employment checks:
 - Health capability check. Required where there is break in service of 3
 months or more or where the individual is returning to a role, which
 involves a significant change of duties.
 - Criminal background check. Where applicable unless the individual has had a check within the last 36 months, which remains fit for purpose, i.e. at the correct level, in accordance with the Trust's Disclosure and Barring Checks Policy
 - Right to work (in relation to immigration status);
 - · Verification of identity;
 - Qualifications required for the post.
 - Professional registration, licence to practice (where applicable) in accordance with the Trust's Professional Registration Policy.

FLEXIBLE RETIREMENT APPLICATION PROCEDURE FLOWCHART

Manager receives application for	flexible retiren	nent.		
Within 21 day			_	
Manager and employee meet to	discuss the ap	plication.		
Within 7 days			_	
Manager writes notifying the employee of their decision.	Request is ACCEPTED	5) a	Both parties will consider what arrangements they need to make when the requested change commences.
Request is REJECTED			_	
	nust appeal in	writing to a m		
The employee needs to decide if manager's decision. If so, they r senior manager, setting out the g	must appeal in grounds for app	writing to a m		
manager's decision. If so, they r senior manager, setting out the g	must appeal in grounds for app	writing to a moeal.		
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RETIRE AND RETURN - SENIOR MEDICAL STAFF

All retired staff can apply to return to work for the Trust. However, there are some specific issues, which need to be considered regarding senior medical staff (i.e. Consultants, Associate Specialists and Specialty Doctors), which are summarised below.

Procedure

Consideration of requests from retired senior medical staff to return to work will be at the Trust's sole discretion, based on service needs.

In the first instance the doctor must submit their request by completing the Flexible Retirement Application Form, a copy of which is available on the HR Forms page of the Intranet. Once completed, this should be submitted to the relevant Divisional General Manager, who will discuss this with the doctor and Clinical Director to enable a decision to be reached, taking into account factors such as:

- In the future is there a need to provide the service in its current form or could it be delivered in a different way?
- If a clinical service review is being considered or is underway, how will agreeing to this request affect this or the doctor making the request as well as other medical staff in the team / specialty?
- Are there any medical staff whose post(s) is/are at risk and who could be considered for all or part of the work?

If DGM and CD agree to the flexible retirement request 'in principle', the proposed terms of a return to work arrangement will be sent to the Director of Operations and Medical Director for consideration.

If the request is approved, a new contract of employment will be issued, together with a new job plan, setting out the terms of re-employment that will apply. Return to work may be on a fixed term or permanent basis depending on service needs.

Pay will be at the pre-retirement rate (pro rata to the number of PAs), excluding any local or national clinical excellence awards or discretionary / optional points (see below).

Supporting PAs must be agreed in advance and will be subject to a maximum of 1.5 PAs per week.

Any study leave provision must also be agreed as part of the new contract of employment.

Pre-retirement appraisal and revalidates dates will be retained.

Clinical Excellence Awards

If a retired consultant is re-employed, any clinical excellence awards of which they were in receipt and that have been taken into account for payment of their NHS pension scheme benefits, cannot be reinstated.

Discretionary and Optional Points (SAS Doctors)

Associate Specialist and Staff Grade doctors who were employed on the pre 2008 TCS prior to retirement, will if re-employed, be issued with a contract of employment based on the 2008 TCS for Specialty Doctors and will therefore not retain any discretionary or optional points.

Associate Specialists

Associate Specialist is a closed grade and no new appointments can be made to it. There is no provision, therefore, for a retired Associate Specialist to be re-employed in this grade.

Specialty Doctors

A retired Specialty Doctor may be re-employed in the Specialty Doctor grade.