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| logo_NHSGG&C_ 2_colour | Address line 1  Address line 2  Address line 3  Address line 4  Postcode |
| **PRIVATE AND CONFIDENTIAL** | **Date**:  **Ref**:  **Telephone**: 0141 201  **Email**: @ggc.scot.nhs.uk |

Dear **<<Name>>**,

**CAREER BREAK AGREEMENT**

I am writing to confirm the terms and conditions of your career break agreement as discussed at our meeting on <<date>>.

As agreed, a career break is special leave without pay for a specified period of time. A career break will not be allowed for the purpose of taking up alternative employment.

The terms and conditions of your career break are as follows:

1. Your career break will be for duration of **<<number>>** year(s) from **<<date>>**. Three months written notice of your intention to return to work must be given and an agreement will be reached as to your specific date of return to work, which will be confirmed in writing. The total length of your career break can be no longer than 5 years.
2. You may be required to make yourself available to undertake a minimum of two weeks paid employment per year, as agreed with myself. This could take a number of forms including attending seminars or meetings, attending training sessions or keeping knowledge updated by reading relevant professional journals or attending professional update meetings.
3. Appropriate levels of communication between manager and employee will be maintained throughout the period of the career break.
4. You will be required to maintain your professional membership/statutory registration during the period of your career break - **\*delete as appropriate**
5. While no guarantee of a return to a particular post can be given, every effort will be made to place you in a post of similar grade and responsibility to that held prior to the break.
6. A period of absence on a career break shall not be regarded as a break in service for NHS continuous service purposes; however the break will not itself count as reckonable service.
7. If you choose to continue to pay superannuation contributions during your career break, you can do so for a period of six months. During this period, contributions also remain payable by the employer. You can choose to extend the period for a further 18 months. However, if this option is taken, you would be responsible for payment of both employee and employer contributions. Please complete the slip below stating your preferred option and return to the HR Support and Advice Unit.
8. Sick leave and annual leave entitlement will only accrue during any periods of paid employment you may undertake with the Board during the Career Break.

If you are in agreement with the terms and conditions of the career break detailed in this letter, please sign one copy below and return to me.

If you have any further questions about the information contained in this letter, please do not hesitate to contact me.

Yours sincerely,

**Name**

**Job Title**

Enc. Career Break Record including pension contribution options

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

**CAREER BREAK AGREEMENT** **RETURN SLIP**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ agree to the terms and conditions of the career break detailed in this letter.

**Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Manager Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please return the above to your line manager to be held in the personnel file.*

**CAREER BREAK RECORD INCLUDING PENSION CONTRIBUTIONS OPTIONS**

*Please return this form to HR Support and Advice Unit, Level 2, West Glasgow ACH, Dalnair Street, Glasgow G3 8SJ. Failure to do so will mean your pension contribution option will not be processed.*

1. ***Personal Details***

|  |  |
| --- | --- |
| **Name:** |  |
| **Payroll Number:** |  |
| **Department:** |  |
| **Sector/Directorate:** |  |
| **Line Manager:** |  |
| **Career break dates to and from:** |  |

1. **Pension Contribution details**

In relation to my pension contributions, I would like to opt for: (please tick preferred option).

Option 1 I wish to maintain my contributions for up to 6 months.

*Payroll will write to you to inform you what you will be required to pay to the Board each month to maintain the contributions.*

Option 2 I wish to maintain my contributions beyond the 6 months and up to a further 18 months. I understand I will be required to pay both the employee and employer contributions monthly.

*Payroll will write to you to confirm the amount of contribution required to be paid each month*.

Option 3 I do not wish to maintain my pension contributions whilst on my career break.

*Please complete the SPPA opt out form, click* [*here*](http://www.sppa.gov.uk/index.php?option=com_content&view=article&id=791:nhs-opting-out&catid=175:forms&Itemid=472) *and you will be removed from the scheme on the last day of work before commencing your career break.*

I would like further information on the costings before making my decision.

***Please return a send a copy of this form to Payroll Department, Caledonia House, 140 Fifty Pitches Road, Glasgow, G51 4ED***