TRUST RETIREMENT GUIDELINES

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1. Introduction

University Hospitals of Derby and Burton NHS Foundation Trust (UHDB) values the contribution of all its colleagues whoever they are, and wherever they work. We are a diverse and inclusive organisation, and these guidelines will not discriminate on the grounds of any protected characteristic that our colleagues may have.

The Trust recognises that personal circumstances may change over the course of a colleagues career and at the same time we want to retain as many of our colleagues for as long as possible.

The guidelines are intended to support colleagues and line managers to make the right decision and identify the range of retirement options available. They also outline the support colleagues can expect when making the decision to take a planned and phased approach from work to retirement or to retire and return to work with us.

2. SCHEMES AND BENEFITS

The NHS Pension Scheme is completely separate from the State Pension arrangements and this means that you will normally get a separate State Pension as well as your NHS Pension. There are different benefits within the NHS Pension Schemes depending upon which section you belong to. If you are unsure which section/scheme you belong to please go to the website at <u>www.nhsbsa.nhs/nhs-pensions</u> to see the member identifier.

1995 Section				
Norma	al Retirement Age is 60			
Memb	pers with Special Class status have a normal retirement age of 55. See section 3 for			
furthe	r information			
The m	ninimum retirement age for members who are in this section of the NHS Pension Scheme			
is as f	follows:			
•	Age 50 if you joined before 6 April 2006			
•	Age 55 for staff who joined on or returned to the scheme after 6 April 2006			
•	An annual pension worth 1/80 th of best of last 3 years pensionable pay and pro-rata for any part year of membership			
•	Lump sum which is usually three times the standard annual pension.			
•	Option to increase lump sum up to a maximum amount by reducing annual pension.			
	Maximum limits apply			

Normal Retirement Age is 65

- The minimum retirement age for members of the 2008 Section is 55.
- An annual pension worth 1/60th of reckonable pay per year and pro rata for any part year of membership
- No automatic lump sum but an option to take a lump sum by reducing annual pension. Maximum limits apply.

2015 Section

Normal retirement age is equal to State pension Age (SPA)

- Normal Retirement Age is equal to the State Pension Age (SPA) or 65 if that is later.
- The minimum retirement age is 55.
- A pension worth 1/54th of each year's pensionable earnings.
- No automatic lump sum but an option to take a lump sum by reducing annual pension. Maximum limits apply.

The quickest and easiest way for colleagues to view an estimate of your pension benefits is on the Trust Total Rewards Statement (TRS) pages through ESR self-service. However, final figures will be calculated by the NHS Pensions Agency.

An overview of all the benefits includes with NHS Pensions can be found in the following link: https://www.nhsbsa.nhs.uk/sites/default/files/2021-07/NHS%20Pension%20Schemes-an%20overview-20210706-%28V6%29.pdf

3. Pensionable Pay

NHS retirement benefits are based on Pensionable pay, which consists of income paid for work completed during your normal working week up to 37.5 hours (Full-time), and could include Basic Pay, Unsocial Hours payments, On call, distinction awards, discretionary points, intensity payments and clinical excellence awards. Any payments made for work over and above full-time hours will be non-pensionable, this could include overtime and call outs. Similarly, part time hours up to full time hours each week will also count as pensionable.

At the end of each tax year or when an employment ends, the Trust payroll department send out an annual update to NHS pensions confirming pensionable hours and payments for the tax year. NHS pensions will use these updates to calculate benefits.

Colleagues who work part time with 1995/2008 section membership will have these benefits calculated using full time equivalent pensionable pay amounts, and not part time pay.

Members who have moved from the 1995/2008 section to the 2015 scheme will retain a final salary link for retirement benefits. This means that 1995/2008 section benefits will be based on pensionable pay at or near retirement, not pensionable pay up to the last day of membership in these sections.

If there is a break in membership of five years or more the final salary link is broken, and 1995/2008 section benefits will be calculated on pay before the break in membership.

2015 section benefits are based on actual pensionable pay and not full-time equivalents.

4. Scheme Changes

In 2015 the government made changes to most public service pension schemes, including the NHS Pension Scheme. These reforms didn't apply to members closest to retirement as they stayed in their legacy schemes (1995/2008 section) with 'transitional protection'. The Court of Appeal later found that this discriminated against younger members, therefore the government is removing this age discrimination from public service pension schemes where transitional protection was introduced.

From 1 April 2022, all colleagues who are in the NHS Pension Scheme will be members of the 2015 Scheme regardless of age. This change means that the 1995 and 2008 Sections of the 1995/2008 Schemes closed on 31 March 2022 with members who qualified for transitional protection automatically moving to the 2015 Scheme. This means when colleagues retire their NHS pension could consist of up to three different parts of the NHS Pension Scheme.

Where colleagues have moved from the 1995/2008 scheme to the 2015 scheme they will be affected by the scheme changes as follows:

- if they joined the pension scheme on or before the 31 March 2012
- were a member of the scheme on or after 1 April 2015
- left the service after 31 March 2012 but returned within 5 years.

At retirement you'll be asked to decide which pension scheme benefits you would like to receive for the remedy period. The remedy period refers to the timeframe the discrimination could have applied, which is between I April 2015 and 31 May 2022. This means that you can choose between the 1995/2008 scheme or 2015 scheme benefits for the remedy period. Colleagues do not need to make any decisions before claiming retirement benefits.

Further details about the changes can be found within the following link: <u>https://www.nhsbsa.nhs.uk/changes-public-service-pensions/understanding-if-your-nhs-pension-affected-changes-public-sector-pensions</u>

5. Special Class Status

Special class applies to certain groups of staff who were members of the scheme before 06 March 1995. These include Registered Nurses; Student Nurses, Occupational Health Nurses; Physiotherapists; Midwives and Health Visitors. Colleagues are strongly advised to check that they are eligible to claim special Class status before proceeding.

Special class status was abolished for new entrants to the scheme who joined after 06 March 1995 and for those who return to NHS employment after 06 March 1995 with a break in pensionable membership for any one period of five years or more.

If you have special class status your normal retirement for 1995 section benefits is age 55 and you may retire at this age without any reduction to benefits for early retirement.

The last 5 years of pensionable employment must be spent in a special class qualifying role, however the last 5 years need not be continuous service.

You would also need to be in a special class post immediately prior to retirement. If you leave pensionable employment before age 55 and do not return benefits will become deferred and normal retirement age will be 60, any 1995 section benefits claimed before age 60 would then be reduced for early payment.

Further details about Special class can be found in the following link: <u>Special Class status (SCS) (PDF:</u> 203KB)

6. Abatement

Abatement is the name of the process whereby a member's NHS pension is reduced pound for pound if their earnings on re-employment in the NHS, plus the unearned element of their NHS pension, exceed their pre-retirement NHS pensionable earnings.

Abatement provisions will apply to NHS retirement benefits if you retire on one of the following grounds without benefits being reduced for early retirement and return to NHS employment before normal pension age:

- Ill Heath Retirement
- Redundancy if retired on or before the 30 September 2011
- Normal pension age awarded between ages 55- 59 for those colleagues with Special class or Mental Health Officer Status.

For colleagues with Special class status, this means that if you are re-employed and NHS earnings plus pension are more than NHS pay before retirement, your NHS Pension would be reduced so that you are not better off after retirement. The amount you can earn before your NHS Pension is affected increases each year in line with inflation, and the abatement ends at age 60.

This abatement rule is currently suspended until 31 March 2025. NHS pensions will write to those affected in advance of the suspension being lifted so that contracts of employments can be adjusted, if needed before earnings become restricted.

7. Annual Allowance

The annual allowance represents the maximum amount that pension benefits can increase by in **one year** without incurring a tax charge and covers all pensions schemes contributed to. If NHS Pensions believe that you have exceeded annual allowance limits within the NHS scheme they will send out a pensions savings statement. If you don't receive this but believe you may exceed you annual allowance limits you can request a pensions savings statement form the NHS pensions helpline: 0300 330 1346.

Further details about annual allowance can be found in the link below: https://www.nhsbsa.nhs.uk/member-hub/annual-allowance

NHS employers have a ready reckoner toll which you can use to estimate if you may exceed annual allowance limits in the current tax year: <u>https://www.nhsemployers.org/readyreckoner</u>. In order to encourage working lives to be extended, the government will reform the pension tax thresholds as follows:

The Annual Allowance will be increased from £40,000 to £60,000 from 6 April 2023. Individuals will continue to be able to carry forward unused Annual Allowances from the 3 previous tax years.

The government will increase the Money Purchase Annual Allowance from £4,000 to £10,000 and the minimum Tapered Annual Allowance from £4,000 to £10,000 from 6 April 2023. The adjusted income threshold for the Tapered Annual Allowance will also be increased from £240,000 to £260,000 from 6 April 2023.

8. Lifetime Allowance

Lifetime allowance is the total benefits that can be built up from all pension schemes without incurring a tax charge. The government will remove the Lifetime Allowance charge from 6 April 2023, before fully abolishing the Lifetime Allowance in a future Finance Bill.

9. Preparation for Retirement

The Trust wants to retain as many of its colleagues for as long as possible. However, there may be pension implications for some colleagues wanting to change their working arrangements and further information on the options and implications can be found by speaking to the Pensions Team or an independent pensions advisor to inform that decision.

Colleagues should also be mindful that the NHS Pensions agency require a minimum of 3 months' notice to process any request for payment of pension benefits at the date of retiring, and in turn need to contact the People Services Trust Pensions Team at least 4-6 months prior to retirement.

To support the smooth transition from work to retirement and maybe return to work, colleagues are encouraged to access the Trust's Preparation for Retirement Course at least 18 months prior to their intended date of retirement, and preferably 3 - 5 years to gain maximum overall benefit in line with mid-career planning.

Our retirement training provider is 'Affinity Connect', and they offer both face to face and virtual training sessions via Microsoft Teams. Preparation for retirement is a one-day course, aimed at all colleagues regardless of age, enabling informed choices about retirement to be made, and Focus on your finances helps colleagues to identify key financial issues that may arise throughout their working lives, supporting them to make key decisions. Dates can be found on the Trust intranet Neti and both sessions are available via My Learning Passport, or through accessing the link below:

Course: Retirement Training (mylearningpassport-uhdb.org)

10. Flexible Retirement - mutual responsibilities

In considering requests for all types of flexible retirement both managers and colleagues need to be open in their thinking about how the request may work practically and with the team. Managers need to be consistent in their decision making and also be prepared to escalate the request to other colleagues in the wider team or across sites. Similarly, colleagues need to be open to all options.

The best approach for colleagues and line managers is to talk to each other, and for line managers to ask themselves the following questions:

- In managing the request are you demonstrating leadership behaviours that are inclusive, compassionate and diverse?
- Does the request fit with the future workforce plan, succession plan and retention aims in your specialty/Division?
- Can the retiring colleague's flexible retirement request be accommodated in terms of hours of work and working pattern and in line with service delivery and patient care?
- Does the request represent overall value for money, especially in light of financial pressures?
- Does the specialty/ward/department require the post to be filled either on a temporary fixed term basis or can it be substantive?
- If temporary, can consideration be given to offering on a fixed term basis only and a compromise reached with full discussion having taken place?
- Is the post considered 'hard to recruit to' currently and/or in the past?
- Is the colleague's conduct, behaviours and standard of attendance acceptable?
- Does the colleague have the skills, knowledge and experience against the essential requirements of the post?
- Do you need to consider the request against other colleagues seeking redeployment within the Trust due to being at risk of redundancy, ill health, capability etc?

11. Extending working lives

Many colleagues may be considering flexible retirement options. NHS Employers are also developing resources to support organisations' understanding of the value of these developments. More information, including the letter members are receiving about the reforms, can be found <u>here</u>

Colleagues who are thinking about retirement are encouraged to have a conversation with their manager as early as possible as this will provide the opportunity to explore all options. It may be that you are initially thinking of retiring altogether but further discussion may look at the option to retire and return to work.

12.1 Normal Age Retirement

Colleagues wanting to retire fully work must resign from their employment, giving the appropriate contractual notice and taking all accrued annual leave prior to their leaving date.

12.2 Flexible Retirement

Flexible Retirement enables us to retain the skills of our colleagues who are at or approaching retirement age, providing greater choice for colleagues to transition between their working life and retirement by looking at the intensity of work in the lead up to retirement.

12.3 Pre-Retirement Wind-Down

Colleagues approaching retirement may wish to gradually reduce the number of hours they work in their current role, leading up to their actual date of retirement. One option to consider is to use annual leave as a means of gradually reducing hours worked without reducing contracted hours. This is especially useful if the intended wind-down period is relatively short e.g. 3 - 6 months.

12.4 Pre-Retirement Step Down

Colleagues approaching retirement may request to continue working in a less demanding role at a lower banding and this could be anywhere in the Trust.

12.5 Retire and Return to Work

The Trust wants to support colleagues to remain or return to work so that they can continue to progress and thrive in the workplace and prevent them falling out of work. Planning for later life can be difficult, and some colleagues may leave the workforce early without a full understanding of their long-term financial resilience.

Nationally, the number of inactive 50 - 64 year olds has increased by 320,000 since before the pandemic, with this age group accounting for 65% of the increase in working-age inactivity over this period. The UK has an ageing population, so encouraging inactive individuals aged over 50 to stay in and return to work would grow the wider economy.

Under the provisions of the NHS Pension Scheme, colleagues have the option to retire from service and take all their pension benefits before returning to NHS employment with the option of accruing further benefits.

In line with the Trust Flexible Working Guidelines, an informal conversation should take place with either your immediate line manager, Head of Service or relevant Executive Director at least 6 months before, to explore the following:

- Proposed date of retirement
- When they would like to return to work and in what capacity
- Request to return to the current role/band/hours or different role/band/hours
- How this may be accommodated within the needs of the service and team.

12.6. Authorisation levels

The decision on whether to approve or refuse the request should be carefully considered by the relevant General Manager/Head of Service or Executive Director as well as the HRBP and all options explored as outlined within the Flexible Working Guidelines. Confirmation should be given to colleagues within 10 working days of receipt of the request. The application form can be found on page 14 of the guidance.

- Requests to retire/return from colleagues up to and including Band 8a will be considered and agreed by the relevant General Manager or Corporate Head of Service and HR Business Partner
- Requests from colleagues at Band 8b and above, as well as medical staff will be considered and agreed at Executive Director level.
- Requests from Executive Directors will be considered and authorised by the Nominations and Remuneration Committee.

12.7. Re-employment with the Trust

- **Pension:** Colleagues in the 1995 section who retire and take their pension benefits before returning to work will be able to join the 2015 section and build further pension benefits. Colleagues who may have returned to the Trust prior to 1 April 2023 and joined an alternative pension arrangement, for example NEST, may be able to transfer your benefits from the alternative pension arrangement into the 2015 Scheme. Transfer must take place within 12 months after becoming eligible to join the 2015 Scheme and take place before normal pension age.
- **Break of Service:** There must be a minimum break of 24 hours between retirement and reemployment to satisfy the requirements of the NHS Pension scheme. This is applicable to all sections of the NHS pension scheme.
- Hours: From 1 April 2023, there is no limit on the number of hours worked during the first calendar month and thereafter of employment.
 Partial Retirement: From Sunday 1 October 2023, provided members reduce their pensionable pay by 10%, they can draw their pension without a break in their employment, stay in their current role, and receive both their pension and salary (GPs must reduce their commitment by 20%) See section 12 for further information.
- **Contract of employment**: Colleagues will be issued with a new contract upon re-engagement, together with a new payroll (assignment) number and, if applicable, a new or amended job description/person specification.
- **ESR Self-service**: Managers should end the employment via ESR self-service and complete a new staff appointment form.
- **Pay Protection**: Colleagues who are in receipt of any earnings-related protection will lose that protection on their return to work following the break in service.
- **Reckonable service:** Colleagues who retire and take pension benefits, will no longer have NHS 'reckonable' service for redundancy purposes (paragraph 16.6 of AfC Terms and Conditions).
- **Continuous service:** Colleagues who takes their pension benefits and return to work with UHDB, will have continuous service begin from the date of return to employment after the break in service.
- **Band/Pay point**: Colleagues returning to the same role with requisite skills and knowledge will return on either the same pay band and pay point or at the top of the pay scale if they are returning to a lower banded post.

- Annual Leave: Previous period/s of NHS service will be counted towards entitlement to annual leave.
- **Occupational Sick pay**: Previous period/s of NHS service will count towards entitlement to sick pay, where there has been a break/s in service of 12 months or less.
- **Deductions from pay**: Colleagues have responsibility for ensuring that Payroll are made aware of any monthly deductions which should continue e.g., *car parking, salary sacrifice, health schemes to avoid lapses in payment.
- ***Car Parking**: Colleagues who wish to continue to park must notify the Car Parking Office at the earliest opportunity and pay for any months you do not work/receive pay in between your actual retirement date and return to work. *Note: Charges are not currently in operation.

12. Draw Down (Partial Retirement)

Partial retirement means that you can claim your pension and continue to work in a more flexible way and is already possible for pension benefits earned in the 2008 and 2015 Sections of the Pension scheme. From 1 October 2023, this will also include any 1995 section benefits.

Members of the 1995 Section who have a protected minimum pension age of 50 will also be able to claim pension benefits without leaving their job. To do this between the ages of 50 and 55, members need to take 100% of pension benefits. From age 55, you'll be able take between 20% and 100% of your benefits in one or two payments, without having to leave work.

Pension benefits will continue to build in the 2015 Scheme, without a break or change jobs. Colleagues just need to reduce their pensionable pay by 10%.

Colleagues considering this option are advised to contact the UHDB Pensions Team for advice and guidance. Up to date information about this change can be found on the NHS Pensions website: <u>https://www.nhsbsa.nhs.uk/member-hub</u>

13. Voluntary Early Retirement (VER)

Colleagues with at least 2 years membership may opt to take VER at any time from the minimum pension age applicable to the scheme they are in. Colleagues are required to resign from their employment, giving the appropriate contractual notice, and taking all accrued annual leave prior to their leaving date. Pension benefits are assessed against the Guaranteed Minimum Pension (GMP) prior to payment and will not be paid out unless passed. Further guidance is available from UHDB Pensions Team.

15. III Health Retirement

Where colleagues are unfortunately unable to carry out the duties of their job on a permanent basis, then they may choose to apply for retirement on the grounds of ill-health and will be supported by the pensions team to receive an estimate of benefits and complete the application form.

This will only be pursued where reasonable adjustments cannot be made, and suitable alternative employment can't be found across the Trust. Medical advisers, appointed by the NHS Pensions Agency, will assess the available medical evidence and will confirm whether the colleague is permanently incapable of carrying out either their present NHS duties or any regular work.

If an application for ill-health retirement is accepted, this constitutes a mutual decision and therefore the termination date will be agreed between the individual and their line manager. A Tier 1 or enhanced Tier 2 pension may be paid dependent upon this decision. Further information may be obtained from the People Support Team in the first instance. Sometimes, ill-health retirement cannot be agreed initially is unable to be initially, but further medical information subsequently becomes available or unfortunately there is a subsequent deterioration in the colleague's condition, then they may re-apply for retirement on the grounds of ill health.

16. Redundancy

The provisions of the NHS Terms and Conditions of service, section 16 will apply to colleagues retiring early on grounds of redundancy.

17. UHDB NHS Retirement Association

For those colleagues who are maybe thinking of joining a group to share their leisure time, the Trust has links to the Derbyshire NHS Retirement Association which is highly valued and supported by the Trust, in recognition of their years of service to the NHS.

Membership is open to retired colleagues, retire and returners or those who may be preparing for retirement at UHDB, and also includes our partners in other NHS Organisations across Derbyshire including Social Care. The association currently has over 100 members who pay a small annual fee to join and meet monthly at a local venue which is also accessible to members with limited mobility.

Members can enjoy days out, lunches, short holidays and importantly a way to make new friends, so there is something of interest to appeal to everyone.

For further details of further information please see the Trust Neti page <u>Retirement Association | z</u> <u>UHDB Intranet</u> or contact Lesley Alexander, Registration Organiser <u>lesalexander1954@gmail.com</u>

18. Monitoring

Line Managers are responsible for ensuring that they retain their own notes/emails if needed of requests for the flexible retirement options of Pre-Retirement Wind Down, Pre-Retirement Step Down, Draw Down and Retire and Return to Work, as well as entering the request on manager self-service under Flexible Working, 'Flexi Retirement' as well as notifying Pay and Pensions Services accordingly.

Monitoring of requests for Retire and Return will be reported annually at People and Culture Improvement Group (PCIG).

19. Supporting Information:

- People Services Pension Team (01332 254702) or e-mail <u>dhft.pensions@nhs.net</u>)
- NHS Pensions Tel: 0300 330 1346 Helpline 8am-6pm Monday to Friday
- Website: <u>www.nhsbsa.nhs.uk/nhs-pensions</u>
- Further information on NHS Pensions and changes can be found in the Member Hub <u>https://www.nhsbsa.nhs.uk/member-hub</u>

APPLICATION FORM - RETIRE AND RETURN

By completing this form (a word version can be found on Neti) and seeking authorisation from their line manager, colleagues are confirming that they have sought pensions advice if they are members of the pension scheme.

Colleague name		
Job Title and band		
Current contracted hours/PAs per week		
Ward/Department/Specialty		
Business Unit/ Division/Corporate Department		
Date you would like to retire		
Date you would like to return		
Do you wish to return to your current role/ band/hours/PAs and/or a different role/band/ hours/PAs?		
Signed:		
Date:		
Line Manager name and signature:		
Email address:		
Date:		
SECTION 1: Please complete if the application is approved and ensure authorisation granted. Retain a copy of the form for your records.		

Reason for approving the request				
Date due to return following retirement (for Retire and Return option only)				
(A minimum break of 1 working day is required following retirement).				
Job Title on return from retirement				
Salary Band & Point on Band following return from retirement				
Additional allowances, such as annual leave				
Hours of work returning to				
Other additional information to be stated within contract of employment:				
Date Termination Form completed on ESR self service				
Date Staff Appointment Form completed on ESR self service				
Line managers to remind the colleague of their responsibility to notify Pay Services if they wish to continue with deductions from salary for, e.g. car parking (where applicable), salary sacrifice schemes etc.				
SECTION 2: Please complete if the application is turned down. Otherwise proceed to authorisation. In either case, the authorising manager must discuss and agree the outcome with their HR Business Partner.				
Please provide reasons for being able to approve the request.				

General Manager/Head of Service or Executive Director signature:	
Date:	
HR Business Partner or Deputy Director of People Services signature:	
Date:	