**Shared Parental Leave in Touch (SPLiT) Form**

**Last amended: September 2019 (brand updates)**

**Keeping in Touch during Shared Parental Leave**

**- An Optional Agreement between Manager and Employee**

**Purpose:**

Whilst on Shared Parental Leave, it is important that a level of contact is maintained between the employee and manager – this assists the manager with staff planning, and assists the employee in their return to work. Consequently, you may wish to maintain a record (see page 2) of contact to show that you have fulfilled any agreements made prior to leave starting, and reviewed matters during the period of leave.

**Process:**

Prior to going on leave, the manager and employee should meet to discuss contact during leave. This may include:

* Level of contact: eg whether the employee would wish weekly or monthly contact or some other agreed interval etc.
* Type of contact: eg minutes of meetings, newsletters, vacancy bulletins etc.
* Method of contact: eg telephone, Email, post, visits to the office.
* Notification of any team events, away days, key meetings, training days etc which could be attended as a Shared Leave in Touch (SPLiT) day.

The manager and employee may, if they wish, record the agreement and keep a record of any contact made during the period of leave.

**Start date of Shared Parental Leave: ................................................................................................**

**Planned date of return (or approximate): .........................................................................................**

The following may be helpful, but is not an exhaustive list:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Nature of Contact** | **Frequency** | **Person Responsible** |
| 1 | Team Newsletter/Update | Every issue/quarterly/six monthly/just prior to return to work | Line Manager |
| 2 | Minutes from meetings eg team meetings | Each occasion/ periodically/just prior to my return to work | Line Manager |
| 3 | SPLiT – days worked (optional) | Maximum of 20 days throughout leave (a SPLiT day can be any number of hours not exceeding a normal days work) | Employee/Line Manager -must inform payroll of hours and dates worked to ensure appropriate payments made |

Please give preferred address for information to be sent: ...................................................................

...............................................................................................................................................................

If you wish to receive information by Email or telephone please give contact details:

Personal Email address: .......................................................................................................................

Preferred telephone number: ................................................................................................................

**Signed: .................................................................................................................................................**

**Employee**

**Signed: ................................................................................. Date: .....................................................**

**Line Manager**

**Optional Contact record during Shared Parental Leave**

Please record the information sent, the date, and the mode of contact, eg telephone, post, Email or office visits.

This form may be signed by the Line Manager as an accurate ongoing record during the leave period.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Team News/Updates** | **Vacancy Bulletins** | **Minutes of key meetings** | **Additional info** | **SPLiT days worked dates and hours (max 20 days)** | **Payroll informed****- date** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**I confirm that this is an accurate record of the contact maintained during the leave of:**

**...............................................................................................................................................................**

**(Employee’s name)**

**...............................................................................................................................................................**

**(Line Manager’s signature)**

**Date: ...............................................................................................................................................................**