ESRC Sustainable Care Programme [SCP]  

Response to BEIS Consultation on Carer’s Leave

The Sustainable Care: connecting people and systems programme is a multi-disciplinary ESRC-funded research programme exploring how care arrangements, currently ‘in crisis’ in parts of the UK, can be made sustainable and deliver wellbeing outcomes.

It aims to support policy and practice actors and scholars to conceptualise sustainability in care as an issue of rights, values, ethics and justice, as well as of resource distribution.

Led by Principal Investigator, Professor Sue Yeandle (University of Sheffield), it works with an extended network of national and international policy, practice and academic partners.

This response draws on research undertaken by SCP programme colleagues¹ specialising in managing work and care and SCP partners outside the UK² with work-care reconciliation expertise. The research includes the following reports and studies currently under way or recently completed (and is additional to our response using the online form): [hyperlinks are included for ease of reference]

**Combining work and care**  
(one of eight SCP research teams, led by Jason Heyes & Janet Fast)
- Re-Imagining Care consultation with experts (2018) Supporting carers to work and care
- Representative survey of working carers (conducted 2019) (report: Austin & Heyes (2020)).
- International review of legislation on carers’ leave/associated policies (ongoing), coordinated by partners at University of Alberta: Australia, Canada, Finland, Germany, Italy, Japan, Poland, Slovenia & Sweden
- PhD study of organisations that provide carers leave on a voluntary basis

**Enhancing organisational effectiveness by modernising support for working carers**
- 3- year study undertaken by RCUK Innovation Fellow Mandy Cook

**Work-care reconciliation policy: Legislation in policy context in eight countries**
- Commissioned report for German Federal Ministry (2017) by Sue Yeandle

This response covers:

1. Carer’s leave: making it widely available to those who need it
2. Importance of care leave
3. Eligibility for Carers’ Leave
4. Availability of leave and process for taking it
5. Examples of care leave in operation
6. What carers’ leave can be used for
7. Costs and benefits to employees and employers
8. International evidence (includes Table 1)

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¹ Prof. Jason Heyes, Dr Annie Austin, Dr Mandy Cook & Ms Camille Allard (University of Sheffield) and Prof. Janet Fast & Ms Jacquie Eales (University of Alberta, Canada).
² In Australia, Canada, Finland, Germany, Italy, Japan, Poland, Slovenia & Sweden, where colleagues in university and government research institutes linked to the UK research team in participation agreements have contributed expertise.
1. CARER’S LEAVE: MAKING IT WIDELY AVAILABLE TO THOSE WHO NEED IT

The BEIS consultation documentation refers to the Conservative Party Manifesto 2019 commitment (p39) ‘We will extend the entitlement to leave for unpaid carers, the majority of whom are women, to a week’. This commitment did not say the leave would be unpaid (nor does the introduction to the Consultation). Nevertheless on p6 (and elsewhere) the Consultation refers to ‘a week of unpaid leave each year’. The Impact Assessment\(^3\) [IA] states: ‘At this point the Government is not convinced that there is a compelling case to introduce pay as well as leave’ (p8, para. 22), although no evidence is provided to indicate what informs this position. The IA also says that ‘Government’s priority is to ensure that the leave is widely available to those who need it’.

We support the Government’s decision to focus on this priority. We think it will not be fully or adequately attainable, however, if carers have to bear the cost of taking carer’s leave by losing pay.

Our evidence highlights the following:

1. The important distinction between ‘paid’ leave and absence that is ‘compensated’. In other jurisdictions where statutory carer’s leave exists, governments have found that, to be widely available to those who need it, the leave needs to be compensated. (Japan, for example, found it needed to introduce compensation for carers - and later adjust this upwards - to improve their ability to take up carer’s leave.) [See Table 1]

2. Our latest data (Austin & Heyes 2020) show important differences between men’s and women’s experiences of combining work and care and of accessing carer’s leave\(^4\). Among employees who were working carers:
   a. A majority of women (58%), compared with 38% of men, found it difficult to combine work and care.
   b. Over 1 in 3 women (36%), compared with 24% of men, had reduced their working hours due to caring.
   c. In the past 12 months, only 15% of women (compared with 25% of men) had taken paid carer’s leave.
   d. Just under a quarter (24% of women and 22% of men) had taken unpaid leave.

In its calculations, the BEIS IA (para.80, 83) uses data from a 2016 survey of HR professionals, noting: 59% of organisations provided some form of leave for carers; ‘76.7% of these firms offer at least 5 days of leave for caring purposes’. This underpins the IA calculation (para. 83) that across ‘all firms (…..) 45.2% provided at least 5 days of leave’.

Recent\(^5\) data presented in Austin & Heyes (2020) cast doubt on this assumption:
   - Only 19% of working carers said their employer offered unpaid leave for carers (9% said paid leave was available).
   - Taking ‘an hour or two’ away from work to attend to family or personal matters was difficult for half of women (48%, compared with 29% of men).
   - Among working carers getting no support at work to manage work and care, ‘paid leave for carers’ was the most commonly desired form of support (by 40%), (compared with 19% wanting unpaid leave).

The Government’s intention to make a week of carer’s leave available to all carers in all kinds of workplaces is welcome – but introducing one week of statutory leave that is unpaid (and uncompensated) is very unlikely to achieve this objective. This view is based on extensive research on this topic over many years (and our knowledge of the UK and international evidence on this topic). An unpaid right could exacerbate inequalities already known to exist in access to the carer’s leave options some employers already offer.

We therefore urge Government to consider how the new carer’s leave it wishes to introduce can be made accessible to all employees. The carers who need the new right most will be employees with lower incomes.

   - Lower paid employees are more likely to be carers. For many, taking leave involves losing vital weekly income and will be unaffordable. Unpaid leave might increase uptake among more affluent carers and help

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\(^3\) BEIS Impact Assessment [RPC-4355(1)]

\(^4\) Representative survey of working carers in England & Wales (Austin and Heyes, 2020).

\(^5\) Data were collected in summer 2019.
build acceptance of the view that combining work and care is normal and desirable (both would be welcome outcomes); however for the lowest paid employees it could be an ‘empty gesture’. It thus risks widening the gap between the working conditions of the better off and those who struggle to make ends meet – and would be inadequate for delivering the Government’s 2019 Manifesto commitment.

Our evidence⁶ suggests many working carers rely on their personal earned income to make ends meet, and would find it very difficult (or impossible) to take advantage of an unpaid leave right. To enable all carers to access the new leave right, we urge the Government to consider offering carers some form of financial compensation (as exists in other countries).

International comparisons

The UK currently lags behind established practice in other comparable economies on this issue. Table 1 shows data for seven other countries’ approaches to carer’s leave, indicating progress made elsewhere. These countries already offer more generous leave, in terms of the time that can be taken away from work - albeit in most cases in specific, rather serious care situations, and in some cases terminal illness (Table 1, second page, re ‘Leave details’).

Most of these countries also compensate the employee, via employment insurance (EI) or welfare benefits (e.g. Sweden 80% of salary [CCL]; Japan 67% [via EI]; Canada 55% of usual earnings [CCB]). Australia and Italy have legislated for employees to be paid normal (base pay rate) wages during carer’s leave. The Australian example (up to 10 days leave p.a.) is in some ways similar to that proposed for GB, as it is rather flexible with regard to both the care situation and how leave may be taken.

We urge Government to consider introducing some form of compensation for persons taking carer’s leave. Costs could be met through a small increase in NI⁷, and employers could use their payroll systems to enable employees to take carer’s leave without total loss of wages, without being excluded from taking Carer’s Leave when needed because they will be unable to make ends meet if they do this.

2. IMPORTANCE OF CARE LEAVE

Our survey evidence emphasises the importance of access to care leave. In our representative survey of almost a thousand working carers (summer 2019, Austin & Heyes, 2020 here) we found:

Among working carers

• 44% found it difficult to combine their paid employment and caring responsibilities.
• Women were more likely than men to find it difficult to combine job and caring responsibilities.
• Half said their caring responsibilities affected their job.
• Most had difficulty concentrating at work because of caring responsibilities.
• 30% had reduced their hours of work because of their caring role.
• 36% had refused a job offer or promotion, or decided against applying, because of their caring role.
• 29% were considering reducing their working hours.
• 24% were considering giving up their job because of their caring role.
• 13% experienced daily difficulties fulfilling caring responsibilities due to time spent working; another 22% experienced such difficulties at least once a week.
• 28% came home from work too tired to do some necessary caring tasks at least once a week (13% daily).

⁶ Many studies of carers’ financial circumstances show carers have poorer financial wellbeing than other people. Our forthcoming (Aug 2020 – Bennett, Zhang & Yeandle) report, based on the UKLHS (Understanding Society), waves 2017-19 & 2020, shows: carers have lower financial wellbeing than others in the population; female carers have lower financial wellbeing than male carers; working carers have lower financial wellbeing than carers without a paid job. Among working carers, 37% found it difficult to combine their work and caring responsibilities (49% for women, 30% for men). Carers’ caring responsibilities affected their job (42%), and made it difficult to concentrate at work (46%); 29% had reduced their hours of work because of caring responsibilities; 36% had refused a job offer, or decided against applying, because of their caring role; 29% were considering reducing their working hours; 26% were considering giving up their job because of caring responsibilities; and 13% experienced daily difficulties fulfilling caring responsibilities due to time spent working; another 22% experienced such difficulties at least once a week.

⁷ NI (National Insurance) is paid by employees at 12% (earnings £11,500 - 50,000 pa) & 2% on earnings above £50,000. Employers pay 13.8% of salary for employees earning over £8,500 pa. Money to compensate employees taking Carer’s Leave could be found by raising the 2% employee rate, adjusting what employers pay, or making earnings of employees over SPA subject to NI (they are currently exempt). Carers taking CL could be compensated by a refund of NI deductions (or reverse payment for low earners), operationalising this via the payroll systems already used to manage NI.
In the previous year

- 46% had used annual leave to provide care
- 24% had worked in the evening to make up hours spent caring
- 23% had worked at weekends to make up hours spent caring
- 15% had taken sick leave to provide care

3. ELIGIBILITY FOR CARER’S LEAVE

In the SCP’s UK-based case studies of organisations (undertaken by Mandy Cook and Camille Allard) we find paid care leave is made available to all employees caring for a relative with a long-term illness or disability.

We think it is important that working carers who care for a neighbour or a friend are NOT excluded (sometimes a working carer may be their only source of support).

4. AVAILABILITY OF LEAVE AND PROCESS FOR TAKING IT

In our case studies, carer’s leave was available from the first day of employment for all carers.

We strongly recommend this approach for the new Carer’s Leave.

- Our findings show that employers need to ensure all employees are aware of the policy and that line managers are trained to respond sensitively and appropriately to carer’s needs.

Guidance should reflect this

- Some case study organisations also allow employees to purchase two weeks additional annual leave per year, which can be paid for over 12 months.

Employers could be offered advice on how to introduce scheme of this type.

- All employers interviewed, in all sectors, offered some form of formal flexible working that employees could use to accommodate caring responsibilities (job sharing, working from home, part-time working, compressed hours, flexitime, annualised hours, staggered hours and phased retirement).

In linked guidance employers should be encouraged to offer a full suite of policies to support working carers.

5. EXAMPLES OF CARE LEAVE IN OPERATION

SCP UKRI Innovation Fellow Dr Mandy Cook found examples of the following organisational practices:

- Short Term Carer Leave that allows for up to one working week’s paid leave (which can be extended by up to a further working week of paid or unpaid leave) to deal with urgent unforeseen care needs. Thereafter, and depending on specific circumstances, a manager may agree a period of annual leave, or unpaid leave.

- Option to use carer’s leave flexibly e.g. not required to take a whole day, which is important for some employees.

- Long Term Carer Leave that allows amendment of contractual work patterns to accommodate an employee’s family life and work requirements, for an agreed period.

- Option to take unpaid carers leave for up to 12 weeks in one leave year, in blocks of (no less than) one week. Employees can choose if salary reduction is reflected immediately, or spread over up to 12 months.

Sustainable Care PhD student Camille Allard found examples of the following forms of paid carer’s leave:

- Paid carer’s leave of one working week per annum.
- Carer’s leave of one full day of paid leave, that can be split across three days.
- 35 paid hours for unplanned care needs or emergencies, taken flexibly
- 35 paid hours per year for appointments or planned events to support caring, taken flexibly
- The right, for carers, to purchase an extra week of holiday.

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8 Comparative international evidence in Yeandle (2017) here also supports this approach.
6. WHAT CARERS’ LEAVE CAN BE USED FOR

Employers who provided paid carer’s leave stated that this could be used for a variety of reasons, including:

- To support the person cared for to attend a hospital, GP, or similar appointment.
- To administer medication.
- To take up to 6 months paid leave during the terminal ill health of a dependant.
- To support a dependant who is hospitalised or needs special care on discharge.
- To support making arrangements for putting a care package in place for a dependant.
- To assist an employee deal with emergency home repairs, e.g. a boiler breaking down.

7. COSTS AND BENEFITS TO EMPLOYERS AND EMPLOYEES

Case study evidence:

- In case study organisations that had introduced carer’s leave, a major reason for doing so was to reduce the extent to which carers took sick leave or annual leave to care for relatives.
- Employers believed the costs of carer’s leave were outweighed by the benefits (reduced sickness absence, reduced staff turnover, increased staff loyalty, reduced likelihood that employees will request reduce working hours, greater likelihood that valued employees will apply for promotion).
- Some employers emphasised that providing carer’s leave gave the organisation a positive image (and demonstrated ‘corporate values’) that made the organisation more attractive to job applicants with care responsibilities.
- The right to time off for emergencies is insufficient, as carers need additional time off to attend planned appointments with the person they cared for.
- Employers saw paid carer’s leave as necessary to ensure it was inclusive of all staff and to discourage employees from using their annual leave or taking sick leave to provide care.

Our (representative) survey of working carers shows:

Working carers who are supported to manage work and care by their employer:

- Can more easily combine work and care.
- Are less likely to reduce their hours of work, quit their jobs or decide against applying for promotions.
- Are less likely to experience difficulties in concentrating in work
- Are more likely to enjoy higher levels of wellbeing.

These benefits to working carers imply benefits to employers, in the form of:

- Better employee retention
- Lower labour turnover
- Lower recruitment and selection costs
- Less absenteeism
- Increased ability to promote high-performing staff.

8 INTERNATIONAL EVIDENCE

A summary in Table 1 is part of ongoing, as yet unpublished, research. Further details can be provided by contacting the Sustainable Care programme manager, Dr Kelly Davidge k.s.davidge@sheffield.ac.uk

In addition to the information on other countries in Table 1, data on two other countries has been provided:

In Poland, up to 14 days co-resident care for a sick family members can be taken, once p.a. It is compensated via a Carers Allowance set at 80% of basic salary and requires a medical certificate. To be eligible, workers must be covered by sickness insurance and be the only person available to provide the care.

In Slovenia, regular employees can take up to 7 days (per sickness episode) to care for a sick (close) family member. A medical certificate is required. The worker is compensated at 80% of their average earnings in the previous calendar year.
Table 1 Summary of arrangements for carers’ leave in 7 countries outside the UK where PAID care leave is legislated

<table>
<thead>
<tr>
<th>LEGISLATION</th>
<th>AUSTRALIA</th>
<th>CANADA</th>
<th>FINLAND</th>
<th>GERMANY</th>
<th>ITALY</th>
<th>JAPAN</th>
<th>SWEDEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>TERMINOLOGY</td>
<td>Personal/Carer’s Leave</td>
<td>Compassionate Care Leave</td>
<td>Job Alternation Leave</td>
<td>Family Care Leave</td>
<td>Congendo straordinario</td>
<td>Family Care Leave</td>
<td>Compassionate Care Leave</td>
</tr>
<tr>
<td>AMENDED</td>
<td>2006, 2009</td>
<td>2014, 2016</td>
<td>1.1.2015</td>
<td>2017</td>
<td>-</td>
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Eligibility criteria

Working situation

Worker eligibility

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<tr>
<td></td>
<td>All except casual employees</td>
<td>All covered by Canada Lab’r Code who have 600 insured hours of work in previous year</td>
<td>Any normally working 75% or more of FT working hours</td>
<td>Any employee</td>
<td>Any employee</td>
<td>Employees with more than 2 scheduled working days pw</td>
</tr>
<tr>
<td>Qualifying period</td>
<td>Leave accrues from wkr’s 1st day of work</td>
<td>No, but see insured hours rule above.</td>
<td>Must have min 20 yrs employment period</td>
<td>-</td>
<td>6 months with current employer</td>
<td>-</td>
</tr>
<tr>
<td>Employers in scope</td>
<td>All covered by Fair Work Act (c87% of employees covered)</td>
<td>Based on employee status</td>
<td>N/A</td>
<td>All</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Person needing care

Age | N/A | N/A | N/A | N/A | N/A | N/A |
|---|---|---|---|---|---|---|

Nature of care need

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<tbody>
<tr>
<td></td>
<td>Personal illness, injury, or unexpected emergency</td>
<td>Serious medical condition with risk of death within 26 weeks</td>
<td>-</td>
<td>Need for care at official Level 1</td>
<td>‘Severely disabled’</td>
<td>Injury/illness/phy/men disab’y; + need for constant care 2+wks</td>
</tr>
<tr>
<td>Evidence required</td>
<td>Medical certificate</td>
<td>Medical certificate</td>
<td>-</td>
<td>Medical certificate&lt;sup&gt;xi&lt;/sup&gt;</td>
<td>Medical certificate&lt;sup&gt;xi&lt;/sup&gt;</td>
<td>Medical certificate and treatment plan</td>
</tr>
<tr>
<td>Relationship to worker</td>
<td>Immediate family&lt;sup&gt;xx&lt;/sup&gt;</td>
<td>Immediate family&lt;sup&gt;xx&lt;/sup&gt;</td>
<td>-</td>
<td>Relatives&lt;sup&gt;xxi&lt;/sup&gt;</td>
<td>Close relatives&lt;sup&gt;xxii&lt;/sup&gt;</td>
<td>Specified fam. member&lt;sup&gt;xxiii&lt;/sup&gt;</td>
</tr>
<tr>
<td>Usual residence</td>
<td>Also covers any co-resident non-family</td>
<td>N/A</td>
<td>-</td>
<td>n/a</td>
<td>Cohabiting – must live in same household</td>
<td>-</td>
</tr>
<tr>
<td>Citizenship and status</td>
<td>Leave can be for care of family living overseas</td>
<td>Can use to provide care outside Canada</td>
<td>-</td>
<td>-</td>
<td>If employee lives outside Italy, max. 1 yr</td>
<td>Sick person &amp; carer must be insured in Sweden</td>
</tr>
<tr>
<td>CONTINUED</td>
<td>AUSTRALIA</td>
<td>CANADA</td>
<td>FINLAND</td>
<td>GERMANY</td>
<td>ITALY</td>
<td>JAPAN</td>
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<tr>
<td>Leave details</td>
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<td></td>
</tr>
<tr>
<td>How much, what period</td>
<td>Based on 10 days pa, can accrue/carry over</td>
<td>27-28 weeks in most jurisdiction</td>
<td>Maximum 180 days</td>
<td>10 days**</td>
<td>Up to 2 years</td>
<td>93 days per eligible family member</td>
</tr>
<tr>
<td>Flexibility in taking leave</td>
<td>Can be taken in single or half days if desired</td>
<td>Can be shared between siblings</td>
<td>-</td>
<td>-</td>
<td>Can be taken as single full days, as needed, over working life</td>
<td>Can be split into 3 periods</td>
</tr>
<tr>
<td>Accumulating leave</td>
<td>Accumulates @ max 10 days p.a. with each year of service</td>
<td>Leave can be taken again in subsequent 52 week periods</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Right to return to job</td>
<td>Yes (same/similar)</td>
<td>Yes (same/similar)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Protection</td>
<td>Unlawful for employer to take adverse action v. employee for using leave</td>
<td>Employer may not take leave into a/c in decisions on training or promotion</td>
<td>-</td>
<td>-</td>
<td>Worker cannot be fired during Leave period</td>
<td>Prohibition of disadvantageous treatment</td>
</tr>
<tr>
<td>Requesting the leave</td>
<td></td>
<td></td>
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<tr>
<td>Notice period</td>
<td>Worker must notify employer ASAP (can be after leave starts) &amp; advise employer of likely duration</td>
<td>ASAP in 9 jurisdictions, in others 1 pay period or similar**</td>
<td>-</td>
<td>Must notify employer immediately of need for leave. No specific form of notification.</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Procedure</td>
<td>Employer may request evidence of need for L</td>
<td>None specified in most jurisdictions</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Pay / compensation</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Normal wages paid</td>
<td>Yes, base pay rate for worker’s ordinary hrs</td>
<td>No, but many are eligible for CCB</td>
<td>No</td>
<td>No</td>
<td>Yes, as per last mth of wage (to max €48,000)</td>
<td>No</td>
</tr>
<tr>
<td>Compensation &amp; level</td>
<td>See above</td>
<td>CCB @ max $573pw / 55% usual earnings</td>
<td>-</td>
<td>-</td>
<td>67%, via Employment Insurance scheme</td>
<td>80% of salary up to max. amount</td>
</tr>
<tr>
<td>Linked welfare benefit</td>
<td>N/A</td>
<td>Compassionate Care Benefit**</td>
<td>Job Alternation Allowance is paid at 70% of UE benefit</td>
<td>Care Allowance; paid from Insurance Fund/relative’s insurance co.</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other financial support</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other points</td>
<td>Personal information given to the employer is regulated under the Privacy Act 1988</td>
<td>Renewable in some jurisdictions if person does not die within 26 wks. Earnings must be -40% for at least 1 week due to care.</td>
<td>JAL offers support for UE persons, who must be recruited to replace worker on JAL.</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>
Endnotes (to Table 1)

1 Australia ALSO offers unpaid options for carer’s leave which can be taken when the paid leave entitlement has been exhausted.
2 Canada also offers Family Responsibility Leave (3-12 days depending on the jurisdiction). FRL enables workers with 3 months’ service (from day one in 3 provinces) AND who are covered by Canada Labour Code can be paid for the first 3 days of care provided to a close family member. No medical certificate is required; ‘reasonable notice’ (to the employer) is normally required.
3 Finland’s legislation also gives employees the right to temporary (unpaid) absence ‘for compelling family reasons’. There is no limit specified; this leave is for family or ‘close persons’.
4 Data for Germany are taken from official published government sources.
5 Since 1992, Italy also has ‘Permesso lavorativo’ (carer’s leave) – up to 3 days per month to care for a ‘severely disabled’ relative or one at end of life. A medical certificate if required.
6 Personal / Carer’s leave is part of Australia’s National Employment Standards (NES).
7 Canada’s system is complex due to multiple variations in different Canadian jurisdictions.
8 Following Finland’s ‘Job Alternation Leave Experiment’ in 1996.
9 Australia’s Fair Work Act 2009, which came into effect 1.1.2010.
10 Most Canadian provinces amended their own labour codes around 2004; Alberta was the last province to implement CCL (in 2014).
11 The Canada Labour Code applies to employees of any federal work, undertaking or business; provincial Employment Standards regulations apply to employees not covered by the federal law. Act does not apply to members of certain professions, such as health care professionals, embassy workers and persons working in employment assistance measures (QC) or commission sales persons, farm labourers, employees of non-profits and certain caregivers (PEI).
12 As of Jan 2010, self-employed individuals became eligible for Compassionate Care Leave benefits
13 Italy: Art. 3, Law 104 (1992) defined as persons with a physical, psychic or sensory impairment, either stable or progressive, that reduces his / her learning or working abilities.
14 Italy: assessment is via a specific Commission (in each health district) of 4 physicians: 1 specialised in legal medicine; 1 in occupational medicine; 1 from among employees of the health district; 1 representing disability assoc. (of 4 national associations recognised for this) relevant to the care recipient’s disability/condition (http://www.handylex.org/schede/commasl.shtml)
15 Defined as: (a) a spouse/former spouse, de facto partner/former de facto partner, child, parent, grandparent, grandchild or sibling of a spouse or de facto partner of the employee (sec.12). Includes step-relations and adoptive relations. It does not matter if the child is an adult.
16 Defined as: Spouse/Common Law partner (1 yr+); child of employee/employee’s spouse/CLP; parent of employee/employee’s spouse/CLP; any person defined in federal EI Act s. 23.1(1).
17 Defined as: grandparents, parents, parents-in-law, spouses, life partners, partners in a civil partnership or cohabiting partners, siblings, brothers-in-law and sisters-in-law, children, adopted or foster children, adopted or foster children of the spouse or life partner, stepchildren, grandchildren.
18 Italy – this covers relatives of the care recipient, in this specific order (i.e. more distant relatives can benefit only if closer relatives are deceased, disabled, divorced, legally separated or missing): 1) spouse or legally recognised partner; 2) parents; 3) children; 4) siblings; 5) relatives up to the third degree (e.g. grand-grandchildren).
19 Japan: defined as spouses, parents, children, parents-in-law, grandparents, siblings, children.
20 To note there is also provision in Germany for up to 6 mths’ unpaid leave, during which workers in firms with 16+ employees are eligible for an interest-free loan as subsistence support. Workers in firms with 26+ employees have the right to reduce their working hrs to 15 hrs pw for up to 24 mths to provide care, & can claim an interest-free loan as subsistence support.
21 In a few Canadian jurisdictions, a 30 day or 13 week/3 month minimum service period applies.
22 Eligible employees in Canada may be entitled to CCB (Employment Insurance Act). After a 1-wk waiting period, EI benefits paid up to 55% of earnings, to a max. $573 per week.