The Scottish Government

Health Workforce Culture, Pay and Partnership Division



Dear Colleague

COMPENSATORY REST FOR AGENDA FOR CHANGE STAFF UNDERTAKING ON-CALL DUTIES

- 1. As part of the larger NHS Scotland Agenda for Change Review, the Scottish Terms and Conditions Committee (STAC) undertook to consider the issue of compensatory rest for staff who undertake on-call duties and produce guidance which would both ensure compliance with current Terms and Conditions and legal requirements, and promote best practice and consistency across the service.
- 2. Following partnership discussion, STAC has now agreed the guidance attached as an Annex to this circular.

Cabinet Secretary Approval

3. The provisions of this circular have been approved by Scottish Ministers under Regulations 2 and 3 of the National Health Service (Remuneration and Conditions of Service) (Scotland) Regulations 1991 (SI 1991 No 537). A copy of the formal approval is attached.

Action

4. NHS Boards and Special Health Boards should review their local arrangements, where appropriate, to ensure they are in line with the parameters set out in the attached guidance.

4 December 2025

Addressees

For action

Chief Executives,
Directors of Finance,
Directors of Human Resources:
NHS Boards and Special
Health Boards, NHS National
Services Scotland (Common
Services Agency) and
Healthcare Improvement
Scotland

For information

Members, Scottish Partnership Forum Members, Scottish Terms and Conditions Committee Members, Scottish Workforce and Governance Committee

Enquiries to:

Colin Cowie Scottish Government Health Directorates Health Workforce Ground Floor Rear St Andrew's House EDINBURGH EH1 3DG

F-mail·

hwfpaytermsandconditions@g ov.scot

Enquiries

- 5. Employees should direct their personal enquiries to their employing NHS Board or Special Health Board.
- 6. Employers should make their own arrangements for obtaining additional copies of this circular, which can be viewed at:

https://www.publications.scot.nhs.uk/

Yours sincerely

JANE HAMILTON

Jane Hamelton

Deputy Director

Health Workforce: Culture, Pay and Partnership Division

The Scottish Government

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NATIONAL HEALTH SERVICE

APPROVAL OF REMUNERATION AND CONDITIONS OF SERVICE

In accordance with regulations 2 and 3 of the National Health Service (Remuneration and Conditions of Service) (Scotland) Regulations 1991 (S.I. 1991/537) the remuneration and conditions of service set out in the attached Scottish Government Health Workforce Directorate circular of 4 December 2025 – PCS(AFC)2025/7 – in respect of Compensatory Rest for Agenda for Change Staff Undertaking On-Call Duties are hereby approved for the purposes of the said Regulations.

JANE HAMILTON

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Deputy Director
Health Workforce: Culture, Pay and
Partnership Division
4 December 2025

GUIDANCE ON APPLYING COMPENSATORY REST RELATED TO ON-CALL FOR STAFF EMPLOYED UNDER AGENDA FOR CHANGE TERMS & CONDITIONS

1. INTRODUCTION

This guidance is intended to highlight the current T&Cs, key principles and best practice to support and encourage consistent application of compensatory rest during periods of on-call throughout NHS Scotland. This document provides the minimum requirements for Boards. Current provisions/agreements that exceed those in this guidance should be maintained.

This summary is based on (and should be read in conjunction with) the following guidance and legislation:

- AFC Terms and Conditions Section 27 Working Time Regulations
- PCS(AFC)2015/3 Arrangements for Agenda for Change Staff who Undertake On-Call duties
- <u>HDL(2003)3</u> Working Time Regulations

Services should review their on-call and compensatory rest provision to ensure that they prioritise immediate compensatory rest.

2. BACKGROUND

NHS Circular (PCS(AFC) 2015/3) Arrangements for Agenda for Change Staff who Undertake On-Call Duties sets out the parameters for on-call stating at section 5.4 that:

"Managers will regularly monitor the on-call arrangement to ensure that they provide the most appropriate level of service required and are within the financial parameters of the service. Managers working in partnership with staff side will ensure the system is fair to the individuals participating."

Along with highlighting at section 11.1 that:

"In all cases, compensatory rest must be given in line with Section 27 of the Agenda for Change NHS Terms and Conditions of Service Handbook and by referring to HDL(2003)3".

Of particular relevance to this guidance is section 27.17 of the AfC Handbook which states:

"Employees should normally have a rest period of not less than 11 hours in each 24-hour period. In exceptional circumstances, where this is not practicable because of the contingencies of the service, daily rest may be less than 11 hours. In these circumstances records should be kept by the employer which will be available to locally recognised unions. Local arrangements should be agreed to ensure that a period of equivalent compensatory rest is provided. Any proposed regular amendment to the minimum daily rest period must be agreed with locally recognised unions. It is recognised that in some emergency situations compensatory rest may not always be possible."

All managers/service leads have a legal obligation and duty to actively manage and mitigate risks relating to working hours within the terms and conditions outlined. Their control of working hours, and in turn management of compensatory rest, should be regarded as forming an integral element of managing health and safety at work and promoting health at work. (Further guidance is available via the Health and Safety Executive)

The Working Time Regulations 1998 at section 10 states:

"A worker is entitled to a rest period of not less than eleven consecutive hours in each 24-hour period during which he works for his employer."

Immediate compensatory rest is required in circumstances where staff or patient safety could be compromised e.g. a member of staff has worked for a period of long duration, in intense circumstances or overnight, and is also rostered to work the next day.

The Working Time Regulations 1998 also confirms that the length of possible interruption to rest periods should be adequately considered, managed and mitigated, particularly where work may be intense.

Along with ensuring that employees receive required rest breaks, managers/service leads have an obligation to ensure that workers are fit to work and free from the effects of fatigue.

Any exclusion/modification of rest periods will be based on objective reasons and might include reasons connected with emergency circumstances. (outlined in Section 5 below)

3. PRINCIPLES OF HOW COMPENSATORY REST SHOULD BE TAKEN

Compensatory rest is intended to support health and safety at work and staff wellbeing; therefore, best practice would be that efficient systems of work and rota/shift management are in place which minimises the requirement for compensatory rest.

When compensatory rest is required, the aim should be that this is taken immediately, or as soon as possible thereafter.

Services should review their on-call and compensatory rest provision to ensure that they prioritise immediate compensatory rest. Current provisions that exceed those in this guidance should be maintained.

It should be noted that exceptions, and the process to be followed, are highlighted at Section 27.17 of the AFC Terms and Conditions and will be covered in Section 5 below.

Where compensatory rest overlaps with rostered working hours, staff are not required to make up these hours later. Compensatory rest in this context is paid time and forms part of the individual's contracted working week.

The following scenarios highlight how Compensatory Rest could be applied if the daily rest period of 11 hours is applied:

(Please note these examples assume work starting at 9am – they are not an exhaustive list, and services should work in partnership to consider their own circumstances based on the principles outlined in this guidance.)

EXAMPLE 1

Employee (works 0900 to 1700) is on call from 1700 to 0900 and receives a call at 10pm for which they are required to attend work, returning home at 0000 (midnight).

Compensatory rest should be provided up to 1100am the following day. The employee should be paid as normal for their contractual hours if the compensatory rest overlaps with any rostered time.

EXAMPLE 2

Employee (works 0900 to 1700) is on call from 1700 to 0900 and receives a call at midnight for which they are required to attend work, returning home at 0400.

To ensure the daily rest period, compensatory rest should be provided until 1500 the following day. The employee should be paid as normal for their contractual hours if the compensatory rest overlaps with any rostered time.

EXAMPLE 3

Employee (works 0900 to 1700) is on call from 1700 to 0900 and has multiple call outs over the night with the final call at 0600.

To ensure the daily rest period, compensatory rest should be provided for the whole of the next day. The employee should be paid as normal for their contracted hours if the compensatory rest overlaps with any rostered time.

EXAMPLE 4

Employee (works 0900 to 1700) is on call from 1700 to 0900, receives a call at 2000 and is back home by 2100 with no further call outs.

Since there is over 11 hours from the end of the call out to starting work there is no compensatory rest required.

4. RECORDING AND MONITORING

All NHS Scotland employers are required to hold documentary evidence to confirm compliance with the Working Time Regulations.

It is recommended that the recording includes:

- Where compensatory rest has been required (and clarity on the reason such as daily rest or weekly rest).
- If compensatory rest is taken, how much time was taken.
- If compensatory rest was not taken, the reasons for it and if it will be taken at a later stage.
- If compensatory rest is refused, the reason for the refusal.

Boards should consider monitoring of this documentation, for example through the Staff Governance Committee. This would assist in highlighting areas of concern such as overly onerous on-call patterns or use of on-call instead of rostered shift patterns.

5. EXCEPTIONS

There may be emergency situations which mean that immediate compensatory rest cannot be provided, as outlined in section 27.17 of AfC Terms and Conditions. These must be exceptional in nature and must be monitored on an ongoing basis as per section 4 of this guidance. The emergency situation must be clearly documented, and confirmation must be provided of when staff will receive equivalent compensatory rest.