NHS Employers

Part of the NHS Confederation

Pension tax guidance for employers

Local measures to support staff and service delivery during the 2019/20 financial year

September 2019

CONTENTS

Introduction

There are increasing reports that NHS employees are turning down additional work, requesting to reduce their working hours and retiring early due to concerns about pension tax. This is having a significant impact on workforce supply, staff retention and service delivery.

On 7 August 2019, the government announced it will act to introduce pension changes to enable senior clinicians to take on additional clinical activities without incurring unexpected pension tax bills. The Department of Health and Social Care (DHSC) will consult on revised proposals to make the NHS Pension Scheme more flexible to allow senior clinicians (i.e. those in a registered clinical profession) to control the growth of their pension benefits. The announcement also confirmed HM Treasury will review the annual allowance taper to support the delivery of public services, such as the NHS.

This guidance has been prepared to help you support staff who are likely to be affected by pension tax issues. It is intended to support the announcement that gave employers permission to implement a number of optional, temporary measures locally.

While DHSC is not able to mandate employers to implement local arrangements that are complementary or in addition to national contracts and the pension scheme regulations, it recognises that current pensions taxation policies are having a significant impact on workforce capacity in the NHS. Therefore, DHSC is supportive of employers working with their employees and trade union representatives to implement local solutions. Employers are free to reach their own decisions and agreements with individuals locally, without challenge or scrutiny from DHSC, provided they take appropriate advice and have assurance that such agreements are lawful and based on strong justifications.

The measures outlined in this guidance can be used during the 2019/20 financial year to support staff and service delivery, ahead of any changes to the NHS Pension Scheme or wider tax system. All local arrangements should be reviewed from April 2020, as new approaches may become appropriate following the implementation of scheme changes. Being a member of the NHS Pension Scheme will be in the best financial interests of most NHS employees, therefore this guidance can be used to support staff who are affected by the tax issues.

Under the current UK pension tax system, pension contributions and any growth in pension savings are normally exempt from tax up to certain limits set by HMRC. However, pension benefits are taxed when they are paid to the individual in retirement. For members of the NHS Pension Scheme, the annual allowance places a limit on the amount by which an individual's pension may increase during a tax year, without incurring a tax charge. The lifetime allowance is the amount of pension savings an individual can make over a working lifetime without paying tax. If an individual exceeds the annual or lifetime allowance, a tax charge may be due on the excess above these limits. Please see our annual allowance briefing and lifetime allowance briefing for further information.

We would encourage employers to engage with staff and listen to their concerns and suggestions, in order to reach local agreements in partnership with trade union colleagues, to support staff and service delivery. Any local agreements should be reviewed regularly, to ensure any solutions developed and implemented at a national level at a later date are taken into consideration.

Section 1 – The importance of independent financial advice and guidance

Our research into the impact of pensions tax in the NHS shows there is a clear lack of knowledge and understanding about the NHS Pension Scheme and associated tax issues. Pension tax can be a complex area and we strongly encourage employees to take independent financial advice to ensure their decisions are well informed, based on reliable and accurate information and positioned in the context of their overall individual financial position and long-term plans.

An individual's pension tax position depends on their taxable income from all sources, including employment outside the NHS, investments and rental properties. Pension savings from all pension arrangements including personal pensions and other workplace schemes are counted towards the annual and lifetime allowances.

Employers can support staff by signposting to general information and resources to improve understanding and awareness of pension tax issues. However, it is not appropriate for employers or NHS Pensions to give employees advice on their pension tax position, as they are not regulated to give advice and they do not have sufficient information about the employee's individual financial circumstances.

The impact of the tapered annual allowance, particularly on doctors, has been well publicised. The standard annual allowance limit is currently £40,000. However, some employees may be subject to a lower, tapered annual allowance of between £40,000 and £10,000. The tapered annual allowance applies to individuals with 'threshold income' (i.e. broadly all taxable income) above £110,000 and 'adjusted income' (i.e. broadly all taxable income plus the value of pension growth) of £150,000. As both pensionable and non-pensionable income counts towards the calculation of the tapered annual allowance, concern around the tapered annual allowance is a key driver behind decisions to turn down additional NHS work.

It is possible that due to a lack of understanding, individuals who are unlikely to be affected by the tapered annual allowance may turn down additional work unnecessarily. For many clinicians, there is significant scope to do additional pensionable and non-pensionable work without incurring a pension tax liability.

> The tapered annual allowance applies to individuals with 'threshold income' (i.e. broadly all taxable income) above £110,000 and 'adjusted income' (i.e. broadly all taxable income plus the value of pension growth) of £150,000.

For example, assuming the individual does not receive income from outside of the NHS:

If a consultant has an average basic pensionable pay of £91,532, increased by 2 per cent from the previous year, combined with 14 years' pensionable service in the final salary 1995 Section and £5,300 of accrued CARE pension in the 2015 Scheme, the consultant would need to receive additional non-pensionable earnings of at least £62,800 before an annual allowance charge is incurred.

The average total earnings for a consultant are around £113,000, meaning that for many doctors and consultants, there is scope to increase their non-pensionable earnings without being affected by the tapered annual allowance.

Signposting employees to available advice and guidance may help them to maximise their earnings and make informed decisions about their membership to the NHS Pension Scheme, whilst carrying out additional activity. NHS Employers has compiled a list of organisations that are able to give expert guidance and advice for members of the NHS Pension Scheme. This web page has been developed to support employers to provide access to education, guidance and advice. **We are not promoting or recommending the use of any organisation and may amend or update this list at any time.**

Section 2 – Existing flexibilities for employees choosing to remain in the NHS Pension Scheme

a) Managing pensionable pay

Determining certain elements of pay as being non-pensionable may help staff to limit the value and rate of their pension growth and mitigate pension tax issues. For members of the NHS Pension Scheme, the growth in pension benefits during the scheme year is measured against the annual allowance. The value of pension growth is calculated based on pensionable service and pensionable pay. This means scheme members with lower pensionable pay will build up a lower pension and are less likely to breach the annual allowance.

Employees should be aware that non-pensionable payments may still have an impact on their pension tax position. Employees may have a lower, tapered annual allowance if their threshold income exceeds £110,000 and their adjusted income exceeds £150,000. As non-pensionable pay counts towards both threshold income and adjusted income, these payments may reduce the individual's annual allowance limit through the effect of annual allowance tapering. If an employee is subject to the tapered annual allowance, a smaller value of pension growth may cause the employee to breach the annual allowance. Please see our annual allowance briefing for more information about the tapered annual allowance.

Which payments are pensionable?

All employers must comply with the NHS Pension Scheme Regulations. Pensionable earnings are defined in regulation 27 of the 2015 Scheme Regulations.

For staff employed by NHS organisations, pensionable earnings are broadly all salary, wages, fees and other regular payments. The following payments are not pensionable:

- Bonuses (where applicable)
- Payments made to cover expenses
- Payments for overtime
- Pay awards or increases which are expressed by the Secretary of State to be non-consolidated.

Further information is available on the NHS Pensions website about which payments are pensionable and which payments are non-pensionable.

Employers have some flexibility in determining what pay is pensionable, depending on the nature and duration of the payment. As pension tax matters are very specific to the varying circumstances of each individual, we would encourage employers to discuss pensionable pay arrangements with staff individually to reach an appropriate agreement. Such agreements should be reviewed regularly to ensure the arrangements remain appropriate for the individual and the employer. Employers may wish to discuss the existing flexibilities around the following payments:

- Temporary payments – all temporary payments are non-pensionable.
- Local payments – all local payments can be determined as non-pensionable.
- One-off payments – employers may wish to explore options to establish one-off payments in recognition of the completion of additional activity.
- Allowances for undertaking management responsibilities – these are set locally and can be determined as non-pensionable through agreement with the individual.

- Overtime - is non-pensionable.
- Additional programmed activities (PAs) – additional PAs (over 10) are non-pensionable. Employers should ensure job planning processes and any supporting documentation clearly sets out that additional PAs are separate to standard PAs and are subject to regular review.
- Waiting list initiative (WLI) payments – where the acceptance of WLI payments is voluntary and in addition to contracted hours, WLI payments are non-pensionable.

Managing pensionable pay – key considerations:

- **Lower pensionable earnings lead to lower pension benefits in retirement**
  The lower pension benefits received during retirement must be considered alongside any benefit gained from lower annual allowance and/or lifetime allowance charges.
- **The tapered annual allowance**
  Non-pensionable pay still counts towards threshold income and adjusted income, which determine if the employee will have a lower, tapered annual allowance.
- **Setting a review date**
  Employers may wish to review pensionable pay arrangements regularly.

b) Local Clinical Excellence Awards (LCEAs)

New LCEA payments made from 1 April 2018 in accordance with Schedule 30 of the 2003 Terms and Conditions for consultants are non-pensionable, because they are non-consolidated payments and are re-earnable. In contrast, existing LCEAs will remain pensionable until at least 2021. The value of new LCEA payments can be determined by the employer.

Schedule 30 allows employers to review and amend existing LCEA schemes by agreement with their Joint Local Negotiation Committees (JLNCs). There is scope for employers to explore converting existing LCEAs into new LCEAs by individual agreement, so that the payments are non-pensionable to support staff with pension tax issues.

Lower pensionable earnings will lead to lower pension benefits in retirement for all members of the NHS Pension Scheme. The impact on the value of pension benefits in retirement is different depending on which section of the scheme the employee is a member of and if the conversion of the LCEA to a non-pensionable payment reduces the final pensionable pay figure used to calculate benefits.

This arrangement is more likely to be attractive to clinicians who are within three years of their planned retirement date, as the non-consolidated and non-pensionable payment can be made for up to three years without having an impact on the final pensionable pay figure that is used to calculate benefits for members of the 1995 Section of the NHS Pension Scheme. For members of the 2008 Section of the NHS Pension Scheme, final pensionable pay is based on the average of the highest three consecutive years' pensionable pay within the last 10 years before retirement, so there is more flexibility to accommodate changes in pensionable pay.

Local Clinical Excellence Awards - key considerations:

- **The tapered annual allowance**
  New LCEA payments still count towards threshold income and adjusted income, which determine if the employee is subject to a lower, tapered annual allowance.
- **New LCEAs are re-earnable**
  New LCEAs are paid for up to a period of three years and are subject to a review and application process.
- **Lower pensionable earnings lead to lower pension benefits in retirement**
  Reducing pensionable pay will impact on the value of pension benefits earned for all members of the NHS Pension Scheme. The reduction in pensionable pay will impact on the final pensionable pay calculation for members of the 1995 Scheme in particular.

c) Designing TOIL arrangements

Employers may wish to offer staff time off in lieu (TOIL) instead of pay, as this helps to reduce both pensionable income for the purposes of pension growth and the impact of the tapered annual allowance.

This approach has limitations in that it does not directly increase the available capacity for service delivery. However, it is a useful tool to help employers redistribute capacity to ease pressures on service during exceptionally busy periods. For example, a consultant may work additional activity to support the trust with additional service pressures over the winter period and take the time back during less critical periods.

Additional time worked could be recorded and banked to allow staff to save up TOIL over a number of years. The time saved could be used to take longer periods of leave, such as a sabbatical or career break, at the end of the employee's career before retirement, or to support a period of part-time working. The impact on service delivery and future affordability will need to be considered. The precise details of the policy, including the amount of TOIL to be provided to staff instead of pay, should be discussed and agreed locally.

Designing TOIL arrangements – key considerations

- **Recording the additional time worked**
  What systems do you need to have in place to do this? Will you set a limit on the amount of time that can be carried forward?
- **Taking time back**
  How will you enable this to happen? Would it be beneficial to discuss and agree this with the individual before the additional time is worked?
- **Impact on service delivery**
  What are the preferred times during which staff could take back their time with minimal impact on service delivery?
- **Accounting implications**
  Employers may need to ensure that any TOIL carried over into a new financial year is recognised in the organisation's financial accounts.

d) Use of multiple contracts

Employees with multiple contracts of employment can opt out of the NHS Pension Scheme for one or more of their employments. For full-time employees, employers have the option to split the full-time contract into two part-time contracts. The distribution of pensionable and non-pensionable pay across both contracts can be varied to manage pension growth. This approach may help employees to reduce the value of pension benefits built up over the year. Both the ESR payroll system and the scheme regulations are already set up to deal with employees with multiple part-time employments.

This option is similar to the approach where employees opt out of the pension scheme for part of the scheme year, referred to as 'hokey cokey' (as outlined in section 3). However, it has the advantage of maintaining death in service and ill-health retirement benefits, although at a slightly lower level, based on the part-time salary.

We would recommend employers take a cautious approach to using this option, due to the practical issues it may present with employers having to manage different contracts and the impact that termination of one contract (i.e. due to redundancy or disciplinary purposes) may have on the other contract.

Use of multiple contracts - key considerations:

- **Contract documentation**
  The employer may need to close the existing contract of employment and issue two or more new separate contracts of employment.
- **Complexity**
  As a short-term measure for one year, pending the introduction of pension scheme flexibilities, making the significant change of amending contracts may be disproportionate.
- **Opting out**
  The process of opting out is still required under the regulations as contracts of employment are always pensionable. Employers will also need to follow ongoing automatic re-enrolment requirements.
- **Family protection benefits**
  This approach allows employees to remain covered for death in service and ill-health retirement benefits for the whole scheme year. However, the level of benefits payable on death in service or ill health will be lower, due to the lower value of pension benefits earned over the year.
- **Scheme membership**
  For members of the 1995/2008 NHS Pension Scheme, benefits are calculated based on service and whole-time equivalent final pensionable pay. This approach would therefore reduce service, but not final pensionable pay, meaning pension growth will be restricted but perhaps not to the full extent the member may be expecting. For members of the 2015 Scheme benefits are calculated based on actual earnings, so the restriction in pension growth would be more pronounced.
- **Income tax**
  Members should be aware that they will pay more income tax on their salary due to paying lower pension contributions. This may be offset by a reduction in annual allowance tax charge.
- **Final pay controls**
  Employers may wish to seek guidance from NHS Pensions on if a final pay control charge will be incurred when the employee reverts to their original contract before retirement.

e) Establishing new organisations for service delivery

This approach is not generally supported by DHSC or NHS England and NHS Improvement, due to the issues and complexities set out below.

Some doctors have taken the decision to establish new organisations for service delivery, specifically for the completion of additional activities, to help mitigate pension tax issues. A Limited Liability Partnership (or Chambers arrangement) is a group of professionals in independent practice who have joined together to share the costs of practising. This usually involves establishing two legal entities: an administrative body responsible for the allocation and coordination of work and a service organisation that delivers the work through self-employed individuals. The professionals establishing the Chambers arrangements are self-employed and any income received through the arrangement will not be pensionable in the NHS Pension Scheme. This approach introduces potential tax avoidance risks and, from a practical perspective, it may not be possible to take the necessary professional advice and to implement the arrangement during this financial year, before national solutions are available. We recognise existing arrangements are in operation and may be working effectively. However, due to the timescales, risks and set-up costs involved, we would not recommend attempting to establish a new organisation for service delivery during this financial year. This approach is included for completeness but is not generally supported by DHSC because of the issues set out below.

Establishing new organisations for service delivery – key considerations:

This approach is not generally supported by DHSC or NHS England and NHS Improvement, due to the following issues and complexities:

- **Tax avoidance risks**
  Establishing new organisations for service delivery specifically with the aim of reducing exposure to annual allowance and or lifetime allowance tax charges may be viewed as a tax avoidance scheme. Arrangements need to be carefully designed in order to ensure there are no tax liabilities. Employers and individuals should take legal advice and carefully consider any legal risks.
- **Timescales and set-up costs**
  Professional advice may be needed to establish the organisation, which may lead to professional fees and set-up costs. Employers and individuals should consider if the organisation could be established before any scheme changes are introduced at a national level, and if that is possible, whether sufficient benefits could be realised to outweigh the set-up costs and risks.
- **Contracting arrangements**
  How will your organisation contract with the new organisation and what procurement processes need to be carried out?
- **Tapered annual allowance**
  Income from the new organisation is not pensionable and will not count towards pension growth. However, it will count towards threshold income and adjusted income, which determines if the employee is subject to a lower, tapered annual allowance.
- **IR35 considerations**
  The basis on which any organisation is established, the way activities are defined and the extent to which the individuals delivering the services can be substituted, will determine whether or not individuals will be considered as employees for tax purposes.
- **Working arrangements in practice**
  How will trusts control who undertakes specific work and put appropriate assurances and safeguards in place?
- **Indemnity cover**
  What arrangements will need to be in place to ensure indemnity cover?

Section 3 – Potential arrangements for employees who decide to opt out of the NHS Pension Scheme

a) Opting out of the scheme for part of the scheme year

Some employees are choosing to opt out of the NHS Pension Scheme for a period of time, and then returning to the pension scheme to manage their pension tax position. This is sometimes referred to as 'doing the hokey cokey'. This approach allows individuals to build up a lower value of pension benefits over the scheme year to mitigate annual allowance and lifetime allowance issues.

Opting out of the scheme for part of the scheme year - Key considerations:

- **Financial advice**
  We would strongly recommend employees take independent financial advice before opting out of the NHS Pension Scheme. Employees will need advice to understand the optimum value of pension they should earn during the year and the precise point at which they should opt out and re-join the scheme. If an employee pays lower member contributions to the scheme over the year, this will affect their income tax position and should be considered in conjunction with the value of pension gained and any benefit from lower annual allowance tax charges.
- **Family protection benefits**
  Employers should ensure staff are aware that they will not be covered for death in service and ill-health benefits during the part of the year in which they are not an active member of the NHS Pension Scheme. If an employee were to pass away or retire due to ill health during a period where the employee had opted out of the scheme, benefits are payable, but at a lower level. Further information about the exact benefits payable on death or ill health in active service, after leaving service and in retirement, are available on the NHS Pensions website. Individuals may wish to consider setting up alternative cover away from the NHS Pension Scheme.
- **Employer contributions**
  Employers will need to consider if any unused employer contributions could be used to fund an increase in salary. This is covered in more detail below, in section b.

b) Paying the employer contributions as additional salary

The NHS Pension Scheme is one of the most comprehensive and generous schemes in the UK and is a key part of the reward offer for employees in the NHS. The NHS Pension Scheme provides an important opportunity for NHS staff to save and plan for their retirement.

Employers have the option to make an additional pay offer to staff using any unused employer contributions, but employers also have an obligation to ensure that staff are not disincentivised to save for their retirement. Before exercising this option, employers should carefully consider the balance between enabling staff to save for their retirement and current recruitment and retention needs.

This option could be appropriate where an employee has chosen to opt out of the NHS Pension Scheme for the whole year or just part of the year or agreed with their employer to convert previously pensionable pay to non-pensionable pay, due to concerns about pension tax charges.

The payment of additional salary in lieu of scheme membership may be considered necessary to recognise the fact that, due to the interaction of the NHS Pension Scheme with the pension taxation system, staff who are affected by annual and lifetime allowance issues will not get the full value of benefits from their employer's pension contribution in comparison to other colleagues. The payments are one way to restructure the employee's total reward package in order to maintain its value.

In advance of the introduction of the new pension flexibilities, the payment of unused employer contributions as additional salary may be considered in a number of circumstances such as:

1. where an employee has opted out of the NHS Pension Scheme for the full scheme year, for tax reasons.
2. during periods where an employee has opted out of the scheme for part of the scheme year, for tax reasons.
3. where the employee and employer have agreed that an element of pay is no longer pensionable, for tax reasons.

Employers are under no obligation to take this step, but they may use their discretion to design and agree local policies, working with employees and trade union representatives. Employers should ensure that their policies clarify the following points:

- The employer has the discretion to review, amend or remove the policy at any time through consultation and using appropriate notice periods.

- The arrangement is limited and does not form any contractual entitlement.

- Employees are strongly encouraged to take independent financial advice to assess if ceasing contributions to the NHS Pension Scheme is appropriate. Employers are not able to give advice directly or recommend any particular independent financial adviser.

- In order to request payment of employer contributions in place of pension scheme membership, employees must provide evidence that they are affected (or about to be affected) by the annual allowance or lifetime allowance.

- Employees should be aware of the impact on their death in service and ill-health retirement benefits if they are no longer making payments towards their pension.

Employers will also need to consider the position of staff who have already opted out of the NHS Pension Scheme due to tax reasons and whether to include them under any local arrangements. It will be important to carry out an equality impact assessment of any policy and to set out clearly the objective justification if the policy does disproportionately impact on groups with protected characteristics.

The employer contribution rate from April 2019 and funding arrangements

The employer contribution rate is re-assessed every four years as part of the scheme valuation process. As a result of the most recent scheme valuation, the employer contribution rate increased in April 2019 from 14.3 per cent to 20.6 per cent, plus a 0.08 per cent scheme administration levy. The government agreed to provide funding for employers to cover the increase in costs. An interim funding arrangement was put in place for the 2019/20 financial year only, where the additional 6.3 per cent is paid directly to the NHS Pension Scheme from NHS England.

There is currently no mechanism in place for employers to access this additional 6.3 per cent. If employers offer to pay employer contributions above 14.38 per cent to staff as salary, this will represent a cost pressure for employers during the 2019/20 financial year. It is expected that from April 2020, the funding for the increase in employer contributions will be provided to employers directly through business-as-usual arrangements. If the additional 6.3 per cent is paid directly to employers from April 2020, paying employer contributions above 14.38 per cent to staff from April 2020 will no longer create a cost pressure.

Employers should review the level of payments provided to staff at least annually, to take into account any future changes to the employer contribution rate and funding arrangements.

An important note about employer National Insurance Contributions (NICs)

Employers should consider that the payment of additional salary in lieu of scheme membership will lead to an increase in the cost of the employer National Insurance Contributions (NICs) payable in respect of the individual. This increase is approximately equal to 13.8 per cent of the value of the additional salary payments.

Therefore, during the period 1 April 2019 to 31 March 2020, employers can pay up to 14.38 per cent of an individual's pensionable pay (net of the increase in the employer NICs to staff) as additional salary on a roughly cost-neutral basis. This is illustrated in the table below.

	Member of the NHS Pension Scheme	Employee who has opted out receiving 14.38% additional salary
Pensionable earnings	£100,000	£100,000
Amount paid to NHS Pensions from the employer (14.38%)	£14,380	£0
Additional Employer NICs*	£0	£1,744
Net amount paid to employee in lieu of pension	£0	£12,636
Total employer cost	**£114,380**	**£114,380**

*In this simplified example, we have calculated the increase in employer NICs based on a flat rate of 13.8 per cent. In reality, employer NICs are only payable in respect of earnings above the secondary threshold and so the correct value of the employer NICs would be slightly lower than shown in the example. Please see the HMRC website for more information.

The BMA has produced a model policy for introducing an alternative contribution arrangement for employees who can demonstrate that they are impacted by the pension tax thresholds. We know that some employers have adopted this model policy and have found it useful in developing their local policies. Whilst this is not a policy that has been agreed in partnership, DHSC considers that employers could usefully explore this document as the basis for their own local policy, alongside this guidance, with Local Negotiating Committees for 2019/20 in advance of the introduction of the pension flexibilities. It should be noted that we expect business-as-usual funding for the entire 20.68 per cent employer contributions will start in April 2020. Employers are only paying 14.38 per cent in 2019/20 and do not have access to the additional 6.3 per cent during this financial year.

Paying employer contributions as additional salary - key considerations:

- Eligibility and scope
  Employers will need to decide locally, being mindful of affordability pressures, if the arrangements will be available to all employees, just those affected by the annual and lifetime allowances, or just certain staff groups.
- Legal justification
  Trusts will need to ensure they have taken appropriate legal advice and that their rationale for implementing the arrangements can be strongly justified, particularly around any limiting eligibility of the arrangements to particular staff groups.
- Independent financial advice
  Employers should strongly encourage staff to take independent financial advice before making decisions about their pension scheme membership. Employers are not able to give financial advice but may wish to signpost to external organisations. NHS Employers has published a list of organisations that are able to give advice and guidance on pension tax issues for members of the NHS Pension Scheme.
- Family protection benefits
  Ensure employees are aware of the impact on their death in service and ill-health retirement benefits if they are no longer making payments towards their pension.
- Timing of the payment
  The payment of employer contributions as additional salary may take place alongside an arrangement where employees opt out of the scheme for only part of the year. In this case, employers may agree to wait until the end of the scheme year to make the payment, once the value of unused employer contributions over the year is known. This could be given to employees as a one-off, non-consolidated lump sum.
- Impact of the tapered annual allowance
  If an employee opts out of the pension scheme part way through the year and then receives a significant increase in pay, there is a risk the employee may become subject to a lower, tapered annual allowance and a tax charge may be incurred.
- Governance
  Any response to a request for additional salary should be considered as part of a formal process that has been approved by the board of directors and overseen by the remuneration committee.
- Equality impact assessment
  Local pay agreements should be supported by an equality impact assessment.

Please see our briefing for more detail on the issues employers should consider when exploring this approach locally.

Further information and resources

NHS Employers has produced a range of resources to help you raise awareness and improve understanding of pension tax issues:

- Simple briefings on the annual allowance and lifetime allowance.
- A presentation pack to help you explain the value of the scheme and how pension tax allowances work.
- The results of our independent research into the impact of pension tax on the NHS.
- A list of organisations that can give expert guidance and advice on pension tax issues for members of the NHS Pension Scheme.
- An infographic that sets out the key dates and actions for staff and employers in relation to the annual allowance during each tax year.
- A handy quick guide to raise awareness of the options available to members of the NHS Pension Scheme affected by the annual allowance.

Contact us

If you have any questions, email us at: pensions@nhsemployers.org

Follow us on Twitter: @NHSE_Reward

NHS Employers
2 Brewery Wharf
Kendell Street
Leeds
LS10 1JR