

EMPLOYMENT RIGHTS ACT FOR HEALTHCARE



Private healthcare providers face a particular combination of exposures under the Employment Rights Act 2025 (ERA). Bank and casual nursing staff, patient-facing roles with inherent harassment risks, and a workforce model built on flexible arrangements mean three areas require immediate attention.

THE CHANGE	WHAT IT MEANS FOR YOU	WHAT YOU NEED TO DO
Third-party harassment	Healthcare staff are regularly exposed to verbal abuse and harassment from patients, relatives, and visitors. From 30 October 2026, the ERA will reinstate liability for third-party harassment and add a 25% compensation uplift for failure to take all reasonable steps to prevent it. Healthcare is one of the highest-risk sectors for this type of claim.	Conduct a documented harassment risk assessment covering patient-facing roles. Update your policy to address third-party conduct explicitly. Implement de-escalation training. Ensure incident reporting is robust and all steps are recorded.
Statutory sick pay (day-one, no waiting days)	Healthcare employers typically manage higher-than-average absence rates. Day-one SSP for all staff, including bank and part-time workers previously excluded by the lower earnings limit, means a material increase in absence costs across a large clinical workforce. These changes have now been in effect since April 2026.	Update sickness absence policies across all sites and staff categories. Remove references to waiting days. Model the cost impact. Consider whether absence management protocols need recalibrating for the new framework.
Zero-hours and bank staff	Bank staff arrangements will fall squarely within the new guaranteed-hours provisions. Where bank workers are engaged regularly and predictably, they are likely entitled to guaranteed hours reflecting their actual pattern. Shift cancellation compensation is also likely to apply.	Audit bank staff arrangements. Analyse actual working patterns to determine guaranteed-hours exposure. Review contracts and consider redesigning bank arrangements to comply while maintaining necessary flexibility.

THE COST OF INACTION

A private hospital with 150 bank nurses, no third-party harassment risk assessment, and absence policies referencing waiting days has exposure across all three areas. The 25% harassment uplift alone makes a documented risk assessment one of the most cost-effective pieces of compliance work available.

NEXT STEPS

We advise private healthcare providers on practical ERA compliance. A 20-minute initial call is enough to identify priority areas. No charge for that first conversation.

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