

<b>Name of Document</b>	<b>Less Than Full Time Training Approval</b>
<b>Category</b>	Standard Operating Procedure (SOP) - Trainee Management
<b>Purpose</b>	<p>This document is one of a suite of Standard Operating Procedures to support the management of doctors in training across England. This SOP is aligned to the principles of 'A Reference Guide for Postgraduate Specialty Training in the UK' (The Gold Guide). This SOP does not apply to Foundation and Dentistry trainees who are managed under separate Guides ('The Foundation Programme Reference Guide' and 'A Guide to Postgraduate Dental Specialty Training in the UK').</p> <p>Within the SOP, whenever reference is made to the Postgraduate Dean, it refers to the Dean or their nominated representative who will be responsible for managing the process on their behalf.</p> <p>This SOP is intended to be a guide to encourage consistency of practice across England. Due to the complex nature of Postgraduate Medical Training, there will be occasions where Postgraduate Deans will apply their discretion in enacting this SOP to take account of individual circumstances and varying local structures (e.g. Lead Employer).</p> <p>This suite of SOPs will be screened against relevant Equality and Diversity documentation.</p>
<b>Authorised by</b>	Health Education England Deans (HEEDs)
<b>Date Authorised</b>	27/06/2017
<b>Next Review Date</b>	SOP to be reviewed in line with any future Gold Guide revisions, or every 12 months, whichever comes first
<b>Document Author</b>	HEEDs

Version	Date	Author	Notes Reason for Change, what has changed, etc
1	27/06/2017	HEED	Document signed off at HEED

Related Documents

Gold Guide Version 6 <https://www.copmed.org.uk/publications/the-gold-guide>

GMC Position Statement on Less Than Full Time Training: [http://www.gmc-uk.org/Less than full time training GMC position statement 18 October 2011.pdf](http://www.gmc-uk.org/Less%20than%20full%20time%20training%20GMC%20position%20statement%2018%20October%202011.pdf) 45023470.pdf

GMC Position Statement on Academic Training in a Less Than Full Time Setting: [http://www.gmc-uk.org/LTFT Additional position statement on academic training in a LTFT setting January 2012.pdf](http://www.gmc-uk.org/LTFT%20Additional%20position%20statement%20on%20academic%20training%20in%20a%20LTFT%20setting%20January%202012.pdf) 47422647.pdf

NHS Employers Guidance (2005): Principles Underpinning the New Arrangements for Flexible Training:

[http://www.nhsemployers.org/~media/Employers/Documents/Pay%20and%20reward/doctorstraining\\_flexible\\_principles\\_cd\\_080405.pdf](http://www.nhsemployers.org/~media/Employers/Documents/Pay%20and%20reward/doctorstraining_flexible_principles_cd_080405.pdf)

## **Introduction**

HEE has a strong commitment to helping all doctors in training to reach their full potential and to supporting those with child-caring or other caring responsibilities, health concerns, individual developmental opportunities or well-founded personal reasons to continue training on a less than full-time (LTFT) basis. All doctors in training can apply for LTFT training and every application will be treated positively. Those wishing to apply for LTFT training must show that training on a full-time basis would not be practical for them for well-founded individual reasons.

This guidance should be read in conjunction with the related documents listed on the cover page.

Formally, the only requirement to be permitted to train less than full time is a well-founded individual reason. In practice, the Conference of Postgraduate Medical Deans (COPMeD) has agreed the following categories, which serve as guidelines for prioritising requests for LTFT training. However, these categories are not exhaustive. It should be noted that requests to undertake LTFT training cannot be guaranteed. The needs of trainees in Category 1 will take priority.

The eligibility criteria (as described in the Reference Guide for Postgraduate Specialty Training in the UK) are as follows:

**1. Eligibility**

**i. Category 1:**

Those doctors in training with:

- disability or ill health. (This may include ongoing medical procedures such as fertility treatment.)
- responsibility for caring (men and women) for children
- responsibility for caring for an ill/disabled partner, relative or other dependant

**ii. Category 2:**

• **Unique opportunities**

A trainee is offered a unique opportunity for their own personal/professional development and this will affect their ability to train full time (e.g. training for national/international sporting events or a short-term extraordinary responsibility such as a national committee).

• **Religious commitment**

A trainee has a religious commitment that involves training for a particular role and requires a specific time commitment resulting in the need to work less than full time.

• **Non-medical development**

A trainee is offered non-medical professional development (e.g. management courses, law courses or fine arts courses), which requires a specific time commitment resulting in the need to work less than full time.

- iii. Other well-founded reasons may be considered by the Postgraduate Dean in consultation with the GMC (where appropriate) but support will be dependent on the capacity of the programme and available resources as well as compliance with European legislation relating to CCT requirements.
- iv. Those in LTFT training must meet the same requirements in specialty and general practice training as those in full-time training, from which it will differ only in the possibility of limiting participation in medical activities by the number of hours worked per week.
- v. The aims of LTFT training are to:
  - retain in the workforce doctors who are unable to continue their training on a full-time basis
  - promote career development and work/life balance for doctors training in the NHS
  - ensure continued training in programmes on a time equivalence (pro rata) basis

- maintain a balance between LTFT training arrangements, the educational requirements of both full-time and LTFT trainees, and service need.
- vi. In conjunction with the Colleges/Faculties, it is the Postgraduate Dean's responsibility to ensure that all LTFT training of any kind is undertaken in GMC prospectively approved posts and programmes that meet the statutory requirements. The GMC has agreed that if a post is approved for training, then it is also approved for a training placement on a LTFT basis.
- vii. The Postgraduate Dean will seek to integrate LTFT training into mainstream full-time training by:
  - using slot/job shares where it is possible to do so
  - using full-time posts for LTFT training placements where it is possible to do so
  - ensuring equity of access to study leave
  - developing permanent LTFT training programmes in appropriate specialties
- viii. Where such arrangements cannot be made, the Postgraduate Dean may consider the establishment of personal, individualised placements that are additional to those funded through routine contract arrangements, subject to training capacity, GMC approval and resources.
- ix. Employment legislation sets out the statutory right to request flexible working, and sets the minimum standards with which an employer must comply. The legislation does not set a priority order around reasons for requesting flexible working.
- x. Building on the 2005 NHS Employers document 'Principles Underpinning the New Arrangements for Flexible Training', the Gold Guide should be considered as providing separate rights to this legislation, in the context of requesting to undertake LTFT training in a training programme. This reflects the tripartite nature of current practice of supporting LTFT training between the trainee, HEE and the employer/host training organisation.

## **2. Application**

- i. The trainee should complete the LTFT relevant application form; this should normally be submitted along with any relevant supporting documentation to the Postgraduate Dean, allowing time for at least 12 weeks' notice to be given to the Trust before the commencement of the proposed changes to working patterns. A template is provided at Appendix 1, however it is recognised that local offices/lead employers may have specific forms that relate to local employment processes and may be electronic. Accordingly, similar forms may be used. Trainees should visit their local HEE website to identify the relevant application form.
- ii. The trainee should specify which category they are applying for and should demonstrate that training on a full-time basis would not be practical for them for well-founded individual reasons. This requirement for entry to LTFT medical training is set out in relevant legislation. It is the trainee's responsibility to discuss with and gain approval signatures from their Training Programme Director and employer, as specified in the application form. The form will show agreed start and end dates for the period of the LTFT placement, the funding arrangements, and agreed working hours.
- iii. The Postgraduate Dean (or nominated representative) will acknowledge receipt of the completed form, before reviewing along with the supporting documentation. If there is outstanding information required, the Postgraduate Dean's team will liaise with the trainee.
- iv. The LTFT placement and funding will also be subject to agreement with the employer/ host training organisation before the placement can be approved. Those trainees on a Tier 2 visa must comply with the UKVI requirements for minimum salary.
- v. A representative of HEE may decide it is appropriate to discuss an application with the trainee before making a decision about eligibility. A letter will be sent to the trainee and Training Programme Director to confirm HEE's decision.

- vi. HEE will check to ensure that all required documentation and approval signatures have been submitted.
- vii. If the form has received approval from all relevant parties, a letter of confirmation will be sent to the Postgraduate School, the employer and the trainee.
- viii. Trainee's records will be updated as appropriate, once the LTFT training pattern is approved.
- ix. It is the trainee's responsibility to ensure that sufficient notice of changes to working patterns is given to relevant parties.
- x. HEE's decision will only relate to educational support for the application. Employers/host training organisations must make a separate decision about the employment aspects of any request, including the proposed placement and any associated out-of-hours work. For contractual provisions, see the relevant NHS Employers guidance.
- xi. Where a trainee wishes to work part time and train part time, specific case by case approval will be sought from the GMC until guidance is in place.

### **3. Appeal of decision**

If a trainee has had their application to train LTFT declined, they may appeal in writing to the relevant postgraduate dean. The postgraduate dean's decision will be final.

### **4. During the LTFT Placement**

- i. Whilst working and training in an LTFT placement, trainees should:
  - a. reflect the same balance of work as their full-time colleagues. Day-time working, on-call and out-of-hours duties will normally be undertaken on a basis pro rata to that worked by full-time trainees in the same grade and specialty unless either operational circumstances at the employing organisation or the circumstances that justify LTFT training make this inappropriate or impossible, provided that legal and educational requirements are met.
  - b. normally move between placements within rotations on the same basis as a full-time trainee
  - c. LTFT trainees must still adhere to the ARCP process and should submit evidence for review on an annual basis, with an expectation that trainee will have completed a pro-rata amount of the curriculum. A form R will be required to be submitted annually.

### **5. Period of Grace**

- i. The purpose of the period of grace is to provide Specialty trainees (excluding those in General Practice) time to secure a Consultant or other post following attainment of their CCT / CESR.
- ii. The maximum duration of the period of grace is 6 months whether the trainee is full time or less than full time.

APPENDIX 1:

## **APPLICATION FOR LESS THAN FULL TIME TRAINING**

Surname			
First name			
Address			
GMC Number:			
Email Address			
Telephone Number	Home		Mobile
	Work		
Are you an Academic Trainee?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Are you on a visa?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
If yes, please specify type of visa and expiry date			
<b>Current post</b>			
Grade and Year			
NTN/DRN			
Specialty/Programme			
Employing Organisation			
Host placement (when commencing LTFT)			

Planned Start Date for LTFT training	
Current CCT date	
End of Programme and/or Rotation Date	
Educational Supervisor	
TPD / Foundation Programme Director	
Please indicate if currently employed in a training post	Yes <input type="checkbox"/> No <input type="checkbox"/>
There are a variety of reasons why a doctor may wish to train LTFT. Please indicate below, in the section that applies to you, why you feel you are eligible for LTFT.	
<b>CATEGORY 1 APPLICATIONS</b>	
(a)	<p><b>Health related reasons</b></p> <p>Please indicate briefly and attach evidence (GP letter) as appropriate. (You may be expected to attend Occupational Health).</p>
(b)	<p><b>Responsibility for caring for children</b></p>
Year of birth of children	1.



	<p>Please outline your responsibilities and indicate evidence/sources of this</p>
<p><b>CATEGORY 2 APPLICATIONS</b></p>	
<p>(a)</p>	<p><b>Unique opportunities for personal/professional development or well-founded individual reason</b>  (e.g. training for national/international sporting events)</p>
	<p>Please provide details of this (attach as appropriate)</p>
<p>(b)</p>	<p><b>Religious commitment</b> – involving training for a particular role which requires a specific time commitment</p>

	Please provide details of this
(c)	<b>Non-medical professional development</b> (e.g. management courses, law courses, fine arts courses, etc.)
	Please provide details of this
I have discussed my application with my Educational Supervisor or Current Consultant (for those already in programme)  Yes <input type="checkbox"/> No <input type="checkbox"/>	

I have discussed my application with my Programme Director or Scheme Organiser

Yes  No

**PROPOSED LESS THAN FULL TIME TRAINING PLANS**

Please provide details of your proposed training plans. Please note that there is no guarantee that these can necessarily be met.

Anticipated Start Date	
Reason this date was chosen (Arrangements normally commence in line with rotation points)	
Anticipated end date	
Anticipated Trust	
Specialty	

**SECTION B – to be completed with the Educational Supervisor and Trust HR representative**

Period Covered by Timetable	Start date: __/__/____ End date: __/__/____
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**PROPOSED TIMETABLE**

LTFT percentage: \_\_\_\_\_%

Details of Proposed Usual Weekly Timetable; including details of time for research and special experience					
	Monday	Tuesday	Wednesday	Thursday	Friday
<b>AM</b>					
<b>PM</b>					
Please specify the average weekly daytime and on-call hours			<i>Daytime</i>	<i>On-call</i>	
Out of hours supplement – Pay Banding (to be discussed and worked out with HR)					
Please state Banding supplement of full-time trainees with whom you share the rota					
Please indicate if trainee is in a Slot-share or working LTFT in a full time post. <i>[If slot-share, please provide name(s) of slot-share partner(s)]</i>			Slot-share <input type="checkbox"/> LTFT in PT <input type="checkbox"/> post  Slot-share partner(s): _____		

**OUT OF HOURS DUTY**

Details of the Out of Hours Working Pattern for **each hospital/slot** on the training scheme.

**It is a requirement that the Pay Banding Supplement is confirmed with the Employing Medical HR Department Trust, and indicated on the provisional timetable, before submission of this form.**

**Please outline any proposals for rotation within the specialty and/or between specialties ie state date(s)**

Training in management is important and it is proposed that all Specialist Registrars in their final or penultimate year should attend a management training course. They will be expected to participate in clinical directorate or divisional activities and to undertake appropriate project work. The name of an individual Consultant should be designated as taking responsibility for the overview of training of an individual and will be responsible for overseeing the clinical work, training, research, teaching and managerial components of training.

<b>Signed and dated</b> <b>(on behalf of the Consultant Staff)</b>  <i>To be completed by the Consultant Educational Supervisor.</i>  I have discussed the above with the Training Programme director and Clinical Director in my Trust		<b>Signed and dated</b> <b>(Trust HR Officer)</b>	
	[date]		[date]

**Section C: Trainee declaration**

(Please tick boxes to show compliance)

I have discussed this application with my Educational Supervisor and Training Programme Director and they both support my application.		
I have completed all relevant parts of the form and, to my knowledge, all information is correct.		
I have adhered to all guidance and <b>provide evidence attached</b> that the local education provider/Trusts affected are aware and supportive of this LTFT application and proposed timescales		
I understand that I must not begin working LTFT until I have approval from HEE.		
Where you have been unable to tick any of the above boxes, please explain why in the field below. Failure to do this will result in your application form being returned.		
Trainee name		Date
Trainee Signature		

**Section D: Training Programme Director Declaration**

(Please tick boxes to show compliance)

I can confirm that this application is appropriate and that I support the less than full time application		
I can confirm that the relevant trust(s) are aware of and have endorsed the less than full time training arrangement.		
Where you have been unable to tick any of the above boxes, please explain why in the field below.		
Training Programme Director name		Date
Training Programme Director Signature		

**Section E: Postgraduate Dean Approval**

Is the application approved or declined?	Approved Please see conditions on support section below and complete if relevant		Declined Please explain reasons fully below	
Are there any conditions on the approval? <b>This may be proposed dates to be changed to fit with rotational changeover. If none please write n/a.</b>				
If you have declined the application you must complete the section below giving full reasons for your decision.				

Name of Postgraduate Dean		Date	
Signature			

**For Office Use Only**

To be completed by HEE Administration Team	Yes / No	Date
Complete application received		
Evidence of LEP/trust(s) agreement(s) provided		
Evidence of TPD approval granted		
PG Dean approval granted		
Trainee informed of outcome		
Details added to HEE trainee data information systems		
Copy of approved form sent to:- <ul style="list-style-type: none"> <li>• Trainee</li> <li>• Local Education Provider</li> <li>• Employer (if different from the above)</li> <li>• Training Programme Director</li> <li>• Copy for Trainee File</li> </ul>		