

# Less than full time in the School of Medicine

## Guidance and FAQ for trainees in Yorkshire and the Humber

Last reviewed October 2017

This document is written as a simple point of reference for both trainees who are presently working less than full time (LTFT) or who are considering doing so within the School of Medicine. It is written alongside the “Returning to Training in the School of Medicine” guidance<sup>1</sup>. It is not a replacement for the LTFT training policy<sup>2</sup>, application form<sup>3</sup> and flowchart<sup>4</sup> or the return to training scheme<sup>5</sup> guidance but should be seen as bringing them together in a format more accessible and relevant to the medical trainee.

### Applying for LTFT

The application process is clearly laid out in the LTFT Trainee flowchart<sup>4</sup>. In its simplest form, it's a two-step process: approval by HEE followed by approval by a Training Programme Director (TPD) that your employer/trust is able to support you. The first step is submission of the application form<sup>3</sup> which includes describing a reason for wanting to work LTFT to a LTFT coordinator at HEE (See section “Who do I contact...” below). This is reviewed by an associate postgraduate dean within HEE and you receive an email confirming eligibility or not (see section “Who is eligible” below for further information). Your form then gets passed onto the TPD for your programme. They have the job of ensuring there is an appropriate post within the programme for this request and there aren't any specific employment issues at the proposed trust. Approval, if given, is normally given for the duration of a placement and is subject to annual review.

A common concern is regarding who the different people are in the process and who's approving what. A lot of this confusion is due to lack of understanding of the role of HEE in the process. The approval by the associate postgraduate dean at HEE is effectively to say that your requested percentage whole time equivalent (WTE) is appropriate from both an educational point of view as well as that your reason for wanting to work less than full time is appropriate (see “Who is eligible for LTFT” below). This does not make any guarantee regarding the second step being approved. The TPD is responsible for finding an appropriate post that can accommodate your requested WTE% and train you appropriately. This includes ensuring the rota department are happy to work with you.

You may find it useful to read the document “LTFT in School of Medicine – TPD Guidance”<sup>6</sup> to better understand what's being asked of the TPDs.

### Who is eligible for LTFT?

The gold guide<sup>7</sup> (paragraph 6.73) lays out the prioritisation criteria for LTFT training and this is echoed in our LTFT training policy<sup>2</sup>. It is broken down into 2 categories:

Category 1 – doctors in training with:

- Disability or ill health. (This may include ongoing medical procedures such as fertility treatment.)

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- Responsibility for caring (men and women) for children
- Responsibility for caring for an ill/disabled partner, relative or dependant

Category 2 – doctors in training with:

- A unique opportunity for their own personal/professional development
- Religious commitment
- Non-medical professional development opportunities

The Gold Guide<sup>7</sup> (paragraph 6.63) says that “HEE will usually approve LTFT training unless the introduction of LTFT training adversely affects the training available to other trainees in the programme” assuming that the applicant can demonstrate (paragraph 6.72) “that training on a full-time basis would not be practical for them.” This is a viewpoint that we strongly support and so would expect to approve all category 1 applicants and many category 2 applicants but note that the needs of category 1 applicants take priority.

### What percentage can I apply for?

The usual percentages are 50, 60 or 80% WTE. In exceptional circumstances other percentages may be considered. Subject to the eligibility criteria above, HEE would expect to approve all requests at 50, 60 or 80%.

### Do I need a job share? What about supernumerary work?

You absolutely don't need a job share to work LTFT and neither is it your responsibility to find one. It is perfectly acceptable to occupy a full-time slot and in this case your employing trust will get additional remuneration from HEE to enable them to fill the slot in some other way.

Two trainees working 50% or 60% can work in a job share in any combination and may or may not overlap in hours. A trainee at 80% normally has to occupy a full-time slot or in exceptional circumstances (which needs further approval from HEE) can work in a supernumerary slot.

### How long does applying take?

We would encourage you to begin discussions regarding LTFT training as soon as possible to help give people time to make any adjustments that may need to be made. As a general rule, apply at least three months in advance of your proposed start date. You must not expect to be placed immediately upon submission.

We endeavour to process applications as quickly as possible and under normal circumstances you could expect HEE to have reviewed it within 2 weeks (and for you to have heard back at this stage) and the TPD to have reviewed it, discussed with relevant people and trusts to find a place and got back to you a few weeks after that.

If you haven't heard when you expect to have done or want to chase an application up, contact the LTFT coordinator at HEE who you initially submitted the application to.

### Everything's been approved, now what?

Fantastic! Unfortunately after form A has been completed, your TPD, Educational (or Clinical) Supervisor and yourself still have to complete form C<sup>8</sup> which effectively outlines your job plan. From here, you agree to “work with the trust rota coordinator to agree [your] hours of duty at an

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appropriate percentage.” There is no requirement on what this means and neither is there a requirement for the trust to only offer options in one way or another, it merely has to suit both parties. Solutions for you to explore with your rota coordinator regarding out of hours (OOH) work may include: allocating a 0.6 or 0.8 trainee to 0.5 of a single OOH slot on the rota and agreeing with them in advance dates to add the extra 0.1 or 0.3; fitting three trainees working 0.8, 0.6 and 0.6 into 2 full time OOH slots; putting a LTFT trainee into a fulltime OOH slot and finding the other hours from elsewhere; allocating a 0.8 and 0.5 trainee into one full time OOH slot and accepting that 0.3 of the shifts will have extra staff.

If issues are unresolvable with rota coordinators we have advised your TPDs that they can look at placement options in other trusts and that there's no requirement to fill the space for a trainee that the initial trust has been unable to place. In the first instance however it would be sensible to go back to your TPD, keep the LTFT coordinator at HEE informed and see if they can either help facilitate discussions or consider alternatives.

### How do I appeal a decision?

The document “Appeals procedure for LTFT training”<sup>9</sup> addresses this issue.

### I want to work more than has been approved. Help!

If you've changed your mind regarding the percentage you want to work, see the advice below (“What if I want to increase/decrease my WTE”).

If you've applied for a certain percentage and been offered something lower (such as applied for 80% and offered 60%) we fully appreciate that this has significant implications both financial and in terms of duration of training amongst others. We hope that this will be an exceptional situation.

If HEE approved the initial figure and your TPD hasn't been able to find a way of making this work then the HEE LTFT training policy<sup>2</sup> advises that “exceptional requests around [extra work] will be considered by the deputy dean for LTFT” and certainly applying for a percentage and not being offered it is an exceptional circumstance. You can therefore apply to HEE to be allowed to do extra work if you can find it up to the approved percentage. Any extra work does have to be declared on your Form R and it's the trainee's responsibility to ensure they have adequate indemnity that covers the additional work.

Additionally, “in unexpected circumstances (i.e. sick leave) trainees are encouraged to assist their fellow team members” and additional work is allowed without permission but this does not cover “planned absences (i.e. annual leave)”.

### What about ARCPs, assessments, out of hours or leave?

This is really simple. We'd expect ARCPs to still be undertaken normally on an annual basis. You are expected to complete assessments and progress towards completion of training on a pro-rata basis. For example if a full time trainee were expected to have 10 assessments in a year, a trainee on 80% would expect to have 8 completed. Similarly, out of hours work should be calculated on a pro-rata basis as should leave days (For example if you were in a full time job that had 32 days annual leave, and were moving to 60% WTE, this would give you 19.2 days annual leave - you could always take the .2 by finishing two hours early one day). Study leave is calculated in the same way.

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Days off following on call is a slightly more complicated area. These are in the rota to both make it compliant from a total number of hours worked but also continuous working point of view. If a full-time trainee were expected to work an average of 48 hour weeks over the course of a rotation, a 60% WTE trainee would be expected to work no more than 28.8 hours/week. You could ask your rota coordinator or the BMA to calculate this for you as these days off may need adjusting one way or the other to ensure both adequate training and the correct amount of time is worked.

At present the ePortfolio system isn't able to cope with LTFT trainees and so flags things as being inadequately completed when they aren't. This is outside of our control unfortunately and does mean more LTFT trainees are asked to come to face to face ARCPs. It's probably worth keeping your TPD informed if you feel you've done the correct amount sooner rather than later to see if they're able to bypass this computer generated problem.

If you feel that you're progressing in training at a faster than pro-rata rate and acquiring competences quickly, it may be worth talking to your TPD about applying to shorten your training duration.

### When should I get my rota?

As per the Code of Practice<sup>10</sup> agreed between HEE, NHS Employers and the BMA you can expect to get a generic work schedule at least 8 weeks prior to commencing a job and a personalised 'duty roster' including on-calls at least 6 weeks prior to commencing work. Obviously this is dependent upon applying and getting approval within sufficient time to allow this.

If you are experiencing issues in obtaining a rota in sufficient time, in the first instance you are expected to raise it with your employing hospital and TPD.

If you haven't received a rota prior to this 6 week limit and have things you need to schedule in (such as care arrangements), and assuming you aren't responsible for the rota not being produced in time, book what you need to for the next 6 weeks and inform the staffing department of it. In this way it becomes their responsibility to cover any on-call shifts that they put you on without sufficient notice. If you are facing any difficulties from this point of view please raise them with your TPD and if needed they can escalate to HEE.

We would expect your non on-call arrangements (such as days of the week worked) to be sorted primarily between yourself and your TPD or ES. This is part of your Form C.

The BMA advises<sup>10</sup>:

*"If you are kept waiting during the process at any stage, then do not delay in contacting those running the process – it will benefit you to ensure that the process is being run to time and that you are being contacted regularly. It is important for you to be fully informed, so that you can be prepared for your new post."*

We completely support this statement.

### What if I want to increase/decrease my %WTE?

Many LTFT trainees consider adjusting their %WTE for a variety of reasons and there are obviously advantages and disadvantages to shifts in either direction but we encourage you to

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pursue whatever percentage you feel is right for you at this time. If you want to change, we suggest discussing it with your TPD first and then simply re-applying as per any new request.

If you're contemplating returning full time, this is covered in the LTFT Policy but in summary advises you need to give 6 months' notice to your TPD and HEE (via the LTFT coordinator) but it depends upon the programme being able to accommodate you full time (although in practice this hasn't been an issue to date).

### What's the role of HR/Medical Staffing?

As a general rule HR or Medical Staffing departments don't have much of a role in the LTFT application process. They're not responsible for any stage of the sign-off. If for some reason you are finding difficulties originating from these departments relating to your application, please raise this with both your TPD and LTFT coordinator who may be able to help.

### Who do I contact for further information?

Your main contacts for LTFT requests should be via the LTFT coordinator (details of whom can be found on the LTFT section of the website). Your other main contact should be with your TPD. If you're finding issues that are significantly outside the guidance offered here, discuss with them for advice on whether this is/isn't appropriate and what can be done about it.

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<sup>1</sup> HEEYH Returning to Training in the School of Medicine. Available from [http://yorksandhumberdeanery.nhs.uk/medicine/trainee/returning\\_to\\_training/](http://yorksandhumberdeanery.nhs.uk/medicine/trainee/returning_to_training/) [accessed 10/17]

<sup>2</sup> HEEYH LTFT training policy. Available from [http://yorksandhumberdeanery.nhs.uk/pgmde/policies/less\\_than\\_full\\_time/](http://yorksandhumberdeanery.nhs.uk/pgmde/policies/less_than_full_time/) [accessed 10/17]

<sup>3</sup> HEEYH LTFTTT application form. Available from [http://yorksandhumberdeanery.nhs.uk/pgmde/policies/less\\_than\\_full\\_time/](http://yorksandhumberdeanery.nhs.uk/pgmde/policies/less_than_full_time/) [accessed 10/17]

<sup>4</sup> HEEYH LTFTTT Trainee Flowchart. Available from [http://yorksandhumberdeanery.nhs.uk/pgmde/policies/less\\_than\\_full\\_time/](http://yorksandhumberdeanery.nhs.uk/pgmde/policies/less_than_full_time/) [accessed 10/17]

<sup>5</sup> HEEYH Return to training scheme. Available from: <http://yorksandhumberdeanery.nhs.uk/media/968421/Return%20to%20Training.pdf> [accessed 10/17]

<sup>6</sup> HEEYH LTFT in School of Medicine – TPD Guidance. Available from [http://yorksandhumberdeanery.nhs.uk/medicine/trainee/less\\_than\\_full\\_time\\_training/](http://yorksandhumberdeanery.nhs.uk/medicine/trainee/less_than_full_time_training/) [accessed 10/17]

<sup>7</sup> COPMED. A reference guide for postgraduate specialty training in the UK (Gold Guide). 2016; 6<sup>th</sup> Edition. Available from: <https://www.copmed.org.uk/publications/the-gold-guide> [accessed 09/17]

<sup>8</sup> HEEYH Form C. Available from [http://yorksandhumberdeanery.nhs.uk/pgmde/policies/less\\_than\\_full\\_time/](http://yorksandhumberdeanery.nhs.uk/pgmde/policies/less_than_full_time/) [accessed 10/17]

<sup>9</sup> HEEYH Appeals procedure for LTFT trainees. Available from [http://yorksandhumberdeanery.nhs.uk/media/788718/lftt\\_appeals\\_procedure.doc](http://yorksandhumberdeanery.nhs.uk/media/788718/lftt_appeals_procedure.doc) [accessed 10/17]

<sup>10</sup> BMA Code of Practice. Available from: <https://www.bma.org.uk/advice/employment/contracts/junior-doctor-contract/code-of-practice-in-england> [accessed 09/17]