Less than Full Time Training
Guidance for Emergency Medicine Trainees
(with thanks to Dr Helen Mansfield)

Introduction

Less than full time (LTFT) training is the formal term for what is also known as “flexible training” and “part time training”. It is an option open to all eligible trainees (please see “Who can apply?” below). Less than full time training can facilitate a work life balance for trainees with well-founded reasons without compromising training standards. Planning the correct job plan requires clear communication between stake holders (trainee, TPD, educational supervisor, deanery, medical staffing and rota coordinator) with consideration of changes to income and other professional affiliations. When undertaken correctly it ensures training standards and service requirements are met by trainers and trainees without the necessity of a full time work commitment. This guidance is to help Emergency Medicine (EM) trainees and trainers understand the application process and practical implications of less than full time training.

Contents

Application process

- Who can apply?
- Who to consult?
- How to apply?
- Time frames
- Can I return to full time training in the future?
- What if my application is turned down?

Practical implications

- How much will I need to work?
- How will my working week be structured?
- How will my income be affected?
- How will LTFT training affect my CCT date?
- Does it affect other affiliations, GMC, MDU etc?

Behind the scenes

- Slot share vs. supernumerary, who decides?
- Who pays your wage?
Who can apply?

The principles of LTFT training agreed by the BMA, NHS employers, Department of Health and the Conference of Postgraduate Deans in 2005 allow all doctors with well-founded individual reasons to apply (see here). These are considered in 2 categories.

Category 1

Doctors in training with

- Ill health (including those on IVF programmes)
- Responsibility for caring (men and women) for children
- Responsibility for caring for ill or disabled partner, relative or other dependant

Category 2

Doctors in training with

- Unique opportunities for their own personal/professional development i.e. training for national or international sporting events, involvement with a national committee
- Religious commitment – involving training for a particular religious role
- Non-medical professional development such as management courses, law courses, fine arts, diploma in complementary medicine

This list is not exhaustive and any applicant with a well-founded reason will be considered. Research opportunities are not considered a reason for LTFT training and should be accommodated in other ways. Category 1 applicants have priority and it is expected that deaneries should be able to accommodate these applications.

Who should you consult?

The first step is to decide if LTFT training is right for you. Professionally, your educational supervisor, respected senior colleagues and peers may be able to give you objective advice. It would be recommended to find other LTFT trainees in your region to ask about their experience. Of course family and friends will have important opinions to consider too. If you decide that you wish to apply for LTFT training then you should contact your Training Program Director (TPD) and Head of School. Each deanery will have a LTFT training dean and administrator who will be able to give you guidance on the application process.

How do you apply?

Your deanery will have application forms for you to complete and submit. Most are available on deanery websites; if not, contact your LTFT training administrator. The applications request information about your current training grade and reasons for requesting LTFT training. Remember, the person considering your application may not know you or your individual situation so be prepared to expand on this. Please see figure 1 for a schematic representation of the overall process.
**Time frames**

Applications are expected to be processed by deaneries within 3 months. If your application is successful you will then need to make further arrangements with your TPD, educational supervisor, medical staffing and payroll which can take some time. It may take even straight forward applicants over 6 months to change to LTFT working patterns.

**Can I return to full time training?**

Yes. Anyone in LTFT training can apply to return to full time working. However, there will need to be funds available to support your increased working hours so you may need to await availability of a full time post. Applications should be made through your TPD and deanery.

**What if my application is turned down?**

If your application is turned down by your deanery then firstly discuss your career aspirations with your program director. If you think your application has been dealt with unfairly then seek local resolution first. Approach your deanery and if necessary your local BMA representative. Only once local resolution has failed can a formal appeal be made. Ensuring all communications with the local authorities are documented will aid the process.

To appeal you must submit a “Notification of appeal” form available from your deanery within 30 days of the decision about which you are appealing to the appropriate dean. More information on this can be found at; [http://www.nhsemployers.org/PayAndContracts/MedicalandDentalContracts/JuniorDoctorsDentistsGPReg/Pages/DoctorsInTraining-FlexibleMedicalTraining.aspx](http://www.nhsemployers.org/PayAndContracts/MedicalandDentalContracts/JuniorDoctorsDentistsGPReg/Pages/DoctorsInTraining-FlexibleMedicalTraining.aspx).

**How much will I need to work?**

The latest (18 October 2011) position statement from the GMC (available in full here), in brief, allows LTFT training to a 50% minimum, with a 20% minimum (to last no more than a year) in exceptional circumstances.

Correlation with hours per week;

<table>
<thead>
<tr>
<th>Proportion</th>
<th>Hours per week</th>
</tr>
</thead>
<tbody>
<tr>
<td>100% (full time)</td>
<td>40-48</td>
</tr>
<tr>
<td>90%</td>
<td>36-40</td>
</tr>
<tr>
<td>80%</td>
<td>32-36</td>
</tr>
<tr>
<td>70%</td>
<td>28-32</td>
</tr>
<tr>
<td>60%</td>
<td>24-28</td>
</tr>
<tr>
<td>50%</td>
<td>20-24</td>
</tr>
</tbody>
</table>
The proportion of out-of-hours duties do not need to be exactly pro rata to that of an equivalent full time trainee but must ensure exposure to relevant training opportunities and clinical cases required for the learning needs of the individual. Although minimising your out of hours work may seem attractive remember this may adversely affect your income (please see below). Annual leave entitlement is pro rata. Study leave entitlement is unaltered by LTFT training but you will be expected to attend the same number of regional training days as your full time colleagues. If you attend a study day on a day on which you are not normally scheduled to work then you may request a day off in lieu of this.

**How will my working week be structured?**

This must be considered on an individual basis for each LTFT trainee. Once your application has been approved then you must discuss your needs with your educational supervisor and the consultant in charge your rota. There can be a great deal of variability between EDs in shift length, educational activities etc. and each trainee will have different learning needs and requirements for their non-working time (i.e. a sporting training schedule, child care or alternative education) so flexibility is required on the part of both the trainee and the ED.

Many trainees will opt to work on set days of the week. Others may have more flexibility. The shift timing and hours worked can then be adjusted to fulfil the time requirement, out-of-hours working and educational requirements. Regular educational sessions are to be included in the LTFT hours if attendance is mandatory. The hours worked can be averaged over a number of weeks to facilitate a helpful balance.

Example:
The trainee works 60% (24-28 hrs/week) due to a child care commitment. They have alternative child care arranged for Tuesday, Wednesday and Thursday and their partner is available to care for the child at the weekend.

The ED in which they work has a middle grade rota with 10 hour shifts during week days, 11 hour night shifts and 11 hour weekend shifts. Their departmental teaching is for 2 hours on a Wednesday and the regional training program runs for a full day on a Wednesday once a month.

A rota is agreed where the trainee works 2 weekday shifts, attends all departmental and regional training in addition and works 1 in 4 weekends. They do not work weekdays after they have worked a weekend.
Over a 4 week period this works out as;

<table>
<thead>
<tr>
<th></th>
<th>Hours worked</th>
<th>Number worked in 4 week spell</th>
<th>Hours in a 4 week spell</th>
</tr>
</thead>
<tbody>
<tr>
<td>Normal working week (2x 10 hour weekday shifts plus 2 hours departmental teaching)</td>
<td>22</td>
<td>3</td>
<td>66</td>
</tr>
<tr>
<td>Working week with weekend (2x 10 hour weekday shifts plus 2 hours departmental teaching plus 2x11 hour weekend shifts)</td>
<td>44</td>
<td>1</td>
<td>44</td>
</tr>
<tr>
<td>Regional training day</td>
<td>8</td>
<td>1</td>
<td>8</td>
</tr>
<tr>
<td>Compensatory week day off</td>
<td>10</td>
<td>2</td>
<td>-20</td>
</tr>
<tr>
<td>Total hrs in 4 weeks</td>
<td></td>
<td></td>
<td>98</td>
</tr>
<tr>
<td>Average hrs/week (total/4)</td>
<td></td>
<td></td>
<td>24.5</td>
</tr>
</tbody>
</table>

The average hours worked are 24.5 hrs/week and allow for 3.5 hrs/week of non-clinical working time within the 60% band.

**How will my income be affected?**

There are 2 components to consider when calculating a change in salary from a full time to LTFT training;

1. The basic salary
2. Out of hours supplement

The basic salary is calculated as a proportion of the full time equivalent,

**Current basic salary x proportion as LTFT trainee (0.5 for 50%, 0.6 for 60%, 0.7 for 70% etc)**

I.e. if you are an Specialty registrar on point 5 of the salary scale with a basic salary of £39,300 and will be working 60% of full time your new basic salary will be £23,580 (39300 x 0.6 = 23580).

The supplement you are eligible for can be calculated using the tool available at;

http://www.nhsemployers.org/PayAndContracts/MedicalandDentalContracts/JuniorDoctorsDentistsGPRReg/Pages/DoctorsInTraining-FlexibleMedicalTraining.aspx
This will assign you a band:

<table>
<thead>
<tr>
<th>Band</th>
<th>Supplement</th>
</tr>
</thead>
<tbody>
<tr>
<td>FA</td>
<td>50%</td>
</tr>
<tr>
<td>FB</td>
<td>40%</td>
</tr>
<tr>
<td>FC</td>
<td>20%</td>
</tr>
</tbody>
</table>

In general most ED LTFT trainees are eligible for band FA as they will be working more than 1 in 6.5 weekends. This supplement can then be applied to your NEWLY CALCULATED basic salary to give you the total. Contact your medical staffing personnel once you have confirmed your job plan with your educational supervisor and they will help you with this.

**How will LTFT training affect my CCT?**

Your length of training will elongate proportionally depending on the percent of full time work you are undertaking. In some circumstances, where a period of time off has been required before starting or during LTFT training, for example maternity leave or sick leave, 3 months of this time can count toward your higher specialist training. The training administrator at the CEM must be informed of your change in working circumstance and will be able to help you recalculate your CCT.

**Are other affiliations affected?**

All trainees in the UK will be registered with the GMC and should have professional indemnity with the MDU or MPS. It is important that these organisations are kept informed of your working circumstances and will need to be contacted. The GMC have reduced rates for their annual retention fee for those with a total income of less than £26,000 a year. The MDU and MPS both offer reduced premiums for LTFT trainees. Exact fees vary depending on your grade and how much you will be working. If you have income protection or critical illness cover then you will need to inform your provider to ensure your policy is valid and correct.
Slot share vs. supernumerary

A slot share is where 2 or more LTFT trainees work together to make up one whole time equivalent (WTE) post. An allowance for handover time will be built into the job plan of each person working in the slot share, therefore 2 trainees working 60% can make up one WTE with additional time for handover. The nature of Emergency Medicine does not necessitate hand over in the same fashion as other specialties yet this additional time may be necessary to facilitate attendance of both trainees at educational activities etc. This is favourable for the deanery as the trust will pay for the WTE, (50% in this case going to each trainee) and the deanery fund the additional time (10% to each trainee). Slot share is not the same as job share. 2 trainees in a slot share may be able to work the same shift pattern depending on the flexibility of the ED in which they work. In a job share the job plan is set and the individuals divide the work between them.

Supernumerary posts are held by one LTFT trainee. This has the down side of potential gaps in the rota for the ED in which they work and has implications for funding, but may allow trainees to commence LTFT training at short notice, for example in the case of ill health or facilitate a phased return to work.

It is the role of your TPD and deanery to allocate you to your post, be this slot share or supernumerary.

Who pays your wage?

When working in a slot share the trust will fund the WTE basic salary divided between the trainees and the deanery will fund the additional basic salary for each trainee. This may mean that your deanery is unable to facilitate trainees working more than 60% of full time or may ask trainees to wait until a slot share becomes available before commencing their LTFT training. When working in a supernumerary post all of the basic salary is funded by the deanery. Trusts are responsible for paying all the out of hours supplemental banding. At present it seems that some deaneries have funding for LTFT trainees in Emergency Medicine but not other specialties due to the current gaps in EM specialty training rotations.

On a practical level it is important is to ensure you have written confirmation from your educational supervisor and deanery of the proportion of full time and out of hours work you will be undertaking for medical staffing personnel and that you, your deanery and your trust are communicating about this well in advance of commencing your post.
Consider LTFT training

• Discuss with Educational Supervisor, TPD, Head of School, friends and family
• Contact deanery LTFT training administrator re application process

Agree LTFT training appropriate

• Complete application form

Application successful

• Agree a job plan with Educational Supervisor and rota coordinator

Ensure all agencies kept informed

• Liaise with deanery and medical staffing
• Inform CEM, GMC, MDU/MPS, income protection provider