

Less Than Full Time (LTFT) Training Policy

This document sets out the policy for applying to train less than full time in Health Education England, East of England for foundation and specialty trainees.

Public Sector Equality Duty

On 5 April 2011, the Public Sector Equality Duty (the equality duty) came into force. The equality duty was created under the Equality Act 2010. The equality duty was developed in order to harmonize a number of pre-existing pieces of equality legislation and to extend protection across what the Act described as “protected characteristics”. Protected characteristics is the term used to describe groups that may be discriminated against because they possess one or more of these characteristics and the Act identified nine protected characteristics and these are:

age;
disability;
gender reassignment;
marriage and civil partnership;
pregnancy and maternity;
race;
religion or belief;
sex; and
sexual orientation.

Health Education England is committed to equality and diversity within the organisation and this policy is in line with the Equality Act 2010. HEE will ensure that the application of any part of this policy does not discriminate, either directly or indirectly, against any of the protected characteristics

1. Introduction

- 1.1 Less Than Full Time (LTFT) training is a scheme whereby eligible trainee doctors of all grades are able to work on a part time basis. Full time training relates to a standard 40 hour week.
- 1.2 The [Improving Working Lives \(IWL\) standard](#) aims to improve employees' working lives by improving their work / life balance and providing employment conditions which enable all doctors to work and train in the NHS to their full potential. LTFT is included as one of the IWL standards.
- 1.3 Health Education East of England (HEE), fully endorses the principles set out in the [Gold Guide](#).
- 1.4 HEE aims to provide a robust provision of LTFT, to promote LTFT, and to manage the LTFT budget in such a way that LTFT is available to as many eligible trainees as possible.

2. Eligibility

- 2.1 LTFT training in this region is available to doctors in training who hold an east of England Training Number and are able to present well founded reasons as to why full time training is impractical. The eligibility criteria are described in the [European Union Council Directive 93/16/EEC 1993](#) and provisions of the Employment Rights Act (as amended) 1996 and its associated legislation.
- 2.2 There are 2 eligibility categories:

Category 1 – Those doctors in training with:

- disability or ill health
- responsibility for caring for children (men and women)
- responsibility for caring for ill/disabled partner, relative or other dependant.

Category 2 - Those doctors in training with:

- unique opportunities for their own personal/professional development, for example training for national/international sporting events, or short term extraordinary responsibility, for example a national committee
- religious commitment – involving training for a particular religious role which requires a specific amount of time commitment
- non-medical professional development such as management courses, law courses, fine arts courses or diploma in complementary therapies.

Other well-founded reasons may be considered but it would be dependent on the particular situation and the needs of the specialty in which the individual was training.

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- 2.3 You will be eligible for LTFT training if you have a child up to and including the age of 16 years old or a disabled child who is under 18 years, and receives disability living allowance.
- 2.4 Category 1 applicants will always take priority over Category 2 applicants. HEE will support all Category 1 applicants on the grounds of their health, disability or caring responsibilities, subject to available funds and training capacity.
- 2.5 Access to Category 2 is dependent on individual circumstances and the availability of suitable training placements.
- 2.6 It should be noted that all trainees have a right to request LTFT training, and HEE has a duty to consider each application positively. However, there is no right to LTFT training in itself.
- 2.7 Where an application is refused by HEE, the applicant has a right of appeal, however, the overall training capacity of a training programme and service commitment will have to be taken into consideration.

3. Arrangements for LTFT training

- 3.1 The training programme for a LTFT trainee should contain the same educational opportunities on a pro-rata basis as that of a full-time trainee, including, but not limited to out of hours opportunity, audit, research and teaching.
- 3.2 The GMC Postgraduate Board have issued a position statement determining that trainees will be required to undertake no less than 50% of full-time training.

[GMC position statement on less than full-time training](#)

[GMC additional position statement on academic training in a LTFT setting](#)

- 3.3 For the small number of trainees who experience exceptional difficulties, it has been agreed that Postgraduate Deans should have flexibility to reduce the time requirement further. The absolute minimum would be 20% of full-time training, with an expectation that trainees should not undertake a placement at this level for more than 12 months.
- 3.4 LTFT trainees must do the same amount of on call work pro rata as a full time trainee as a minimum requirement.
 - 3.4.1 Additional hours will inevitably vary from specialty to specialty, and also within a specialty, and even for the same level within a specialty across different Trusts; this does not affect CCT dates.

- 3.5 Since 1 December 2007, in conjunction with Royal Colleges / Faculties, HEE has responsibility for ensuring that all LTFT training of any kind is undertaken in prospectively approved posts and programmes which meet the statutory requirements of the General and Specialist Medical Practice (Education, Training and Qualifications) Order 2003 and the requirements of the Foundation Programme Curriculum.
- 3.6 HEE will therefore approve LTFT training, unless the introduction of LTFT / supernumerary training increases post numbers above the specialty maximum capacity for HEE. Trainees should also be aware that they may require approval from their Royal College, and should discuss this with their Programme Director or Head of School.
- 3.7 Once LTFT Form 1 - Eligibility Assessment & Training Plan (or Form 2 if renewing) is approved by HEE, it may not always be possible to be accommodated LTFT straight away. This will depend on the capacity of the training programme.

4. Application Procedure

- 4.1 In order to apply to train LTFT trainees must fully complete and submit 'LTFT Form 1 - Eligibility Assessment & Training Plan'. This form is available to download from the bottom of the LTFT pages of the HEE EoE [website](#) and must be completed electronically in full by the applicant and emailed to the LTFT [mailbox](#) for HEE approval.
- 4.2 Any submitted applications must be approved by HEE in order for trainees to commence their requested reduced working arrangement. Trainees are not eligible to commence LTFT training until written HEE approval of 'LTFT Form 1 - Eligibility Assessment & Training Plan' (or 'LTFT Form 2 – Training Plan Renewal' if renewing) has been received. This ensures employment arrangements are correct, including appropriate payroll adjustments and additional funding for Trusts.
- 4.3 Applicants should begin the LTFT application process at least three months in advance of the date they wish to commence working LTFT from.
- 4.4 Trainees are required to discuss their intention to apply for LTFT with their Training Programme Director (TPD) prior to submitting 'LTFT Form 1 - Eligibility Assessment & Training Plan'.
- 4.5 Once a trainee has decided they wish to apply for LTFT training, they must fully complete and submit 'LTFT Form 1 - Eligibility Assessment & Training Plan' to HEE. The training plan section of this form should be completed in negotiation with and authorised by their TPD and Educational Supervisor. The form must also be authorised by a senior Medical Staffing Manager or Practice Manager for GP posts.
- 4.6 Eligibility will be assessed by the HEE EoE LTFT Programme Director against the standard eligibility criteria as set out in Section 2.2 of this policy.

- 4.7 Trainees will be informed of the LTFT Programme Director's decision by email, usually within two weeks of submitting their application form, providing no information or required evidence is missing.
- 4.8 If further supporting evidence is required, the trainee may be contacted by a member of the LTFT team. On occasion it may be necessary for the trainee to liaise or meet directly with the LTFT Programme Director to discuss their plans for LTFT and other possible training options.
- 4.9 Trainees on maternity leave are encouraged to plan well in advance and should complete the application process no less than 3 months prior to their planned return date.
- 4.10 If the trainee is deemed ineligible they have the right to appeal, as per section 2.7 of this policy.
- 4.11 Trainees will be notified in writing via email once their 'LTFT Form 1 - Eligibility Assessment & Training Plan' (or 'LTFT Form 2 – Training Plan Renewal' if renewing) has been approved by HEE.

5. Renewal Procedure

- 5.1 Trainees are required to resubmit 'LTFT Form 1 - Eligibility Assessment & Training Plan' if at any time their circumstances change and the reason for which they were originally deemed eligible to train LTFT is no longer relevant.
- 5.2 Trainees must complete 'LTFT Form 2 – Training Plan Renewal' in the following instances:
- Each time they rotate to a different Trust or GP Practice
 - If they would like to change the percentage they are working at
 - Any change in slot arrangements (e.g. if the slot share partner changes, or if they change from slot sharing to LTFT in a full time slot).

Failure to conform to this requirement will result in any HEE EoE funded support ceasing on the end date of the original change of placement.

- 5.3 For the avoidance of doubt, Section 4.1 is applicable whether the trainee is supernumerary, less than full time in a full time slot, or in a slot share, as all of these arrangements will have a staffing impact, financial impact, or both.
- 5.4 The process of completing 'LTFT Form 2 – Training Plan Renewal' should be initiated at least 3 months before any of the circumstances outlined in section 5.2 occur.
- 5.5 When planning the rotation of a supernumerary trainee, it should be considered whether they can be moved into a slot share or work less than full time in a full time

slot. Every effort should be made to accommodate trainees in slot shares or working less than full time in a full time slot.

- 5.6 Trainees are expected to notify HEE if they no longer meet the eligibility criteria. If it is determined that a trainee is no longer eligible under the eligibility criteria, they will be notified in writing via email.

6. Funding Arrangements and Pay

- 6.1 The method for calculating pay for LTFT trainees can be found in the following national guidance from NHS Employers; [Equitable pay for flexible medical training](#)
- 6.2 As part of the application process for LTFT, trainees should discuss their training plan with medical staffing/HR in Trusts and GP Practice Managers in General Practice, who will advise re rotas and pay.
- 6.3 There are three ways a LTFT trainee may be accommodated within HEE EoE;

6.3.1 LTFT in a full time slot

The trainee occupies an established full-time post at reduced hours. Working LTFT in a full time slot offers the most flexibility as trainees are permitted to work at up to 80% of full time, subject to Trust and specialty agreement. The full time post is funded through the education contract so no further funding is committed from the LTFT budget.

6.3.2 Slot Share

Slot shares comprise of 2 trainees occupying one full time post, with both trainees arranging the out of hours component between them.

Full time training relates to a 40 hour week, and the percentage of full time is calculated on this basis. A slot share may be arranged with each trainee working a minimum of 50% of full time up to a maximum of 60% of full time each. HEE encourages trainees to work at 60% each as this allows a handover period, and supports trainee progression and continuity of patient care. HEE provisionally agrees to provide an uplift in funding of up to 20% of basic salary to enable both trainees to work at up to 60% of full time. This is subject to receipt of approved training plans for both trainees. Where 2 trainees share a slot working 50% of full time each, no additional funding is payable by HEE.

6.3.3 Supernumerary

HEE may agree to fund a supernumerary placement in exceptional circumstances (such as illness) for a limited period of time only. These exceptional circumstances will be the subject of discussion between the

Deputy Postgraduate Dean, the Programme Director and the employing Trust.

HEE does not fund out of hours or banding payments.

7. Additional Guidance

7.1 Information for Tier 2 Visa Holders

One of the eligibility points for a Tier 2 Visa application is receipt of an 'appropriate salary'. Currently (01/06/2016) the minimum appropriate salary is £20,500. This threshold must be met throughout the duration of the sponsorship in order for the visa to remain valid. It is the responsibility of the trainee to ensure the less than full time hours of work the trainee is requesting meet this threshold. Any changes in contracted hours and salary must be reported to the trainee's sponsor as soon as they have been approved.

Please note; the minimum salary threshold for those applying for a Tier 2 visa is due to increase to £25,000 in autumn 2016, rising again to £30,000 in April 2017.

7.2 Study Leave

7.2.1 LTFT trainees are entitled to periods of study leave with funding pro-rata of their sessional commitments. For example, a trainee working at 60% of full time will be entitled to 60% of the equivalent full time study leave and funding per year.

7.2.2 At the discretion of the study leave budget holder, LTFT trainees may be permitted to receive additional study leave funding to undertake necessary courses.

7.3 Annual Leave

Annual leave and bank holiday entitlement for LTFT trainees is calculated on a pro-rata basis by the employing Trust. Employing Trusts may have additional policies in this regard.

7.4 Increase of Sessions

7.4.1 LTFT trainees who are working LTFT in a full time slot can request an increase to their percentage of full time. Increases to the initial agreed level may be negotiated with HEE, the trainee and the employer, taking into account training and service needs.

7.4.2 LTFT trainees who are in slot shares are generally only permitted to work up to a maximum of 60% each. In the case of one slot share partner leaving the arrangement (for example, a period of maternity leave), the

remaining partner will usually be working LTFT in a full time slot and has the option to increase their percentage of full time. If the slot share is re-established, both trainees would revert to 60% each.

7.4.3 If a LTFT trainee wishes to increase the number of sessions they work, they should contact the LTFT Administrator at HEE and submit a 'LTFT Form 2 – Training Plan Renewal'.

7.5 Additional Employment

Trainees should not normally be permitted to engage in any other paid employment whilst undertaking LTFT training. However, there will be occasions when short notice additional duties are required in order to deliver a service to patients and LTFT trainees may undertake extra duties to assist colleagues, as this is professional behaviour.

7.6 Acting Up as a Consultant

LTFT trainees may apply for a period of acting up as a consultant, up to a maximum of three months. This is on a fixed-term basis and not pro rata. This requires completion of an [out of programme application form](#) and the agreement of the Training Programme Director, Educational Supervisor and HEE.

7.7 LTFT training in Period of Grace (POG)

The period of grace runs for a period of six calendar months from the time of completion of training, and is not modified on a pro-rata basis for less than full time trainees.

7.8 LTFT training for LATs, LAS and Locums

LAT doctors may apply for LTFT training, and must complete the process in the usual way. However identification of a placement may not be immediately available. LAS and Locums are not associated with HEE and do not hold an EoE Training Number therefore may not apply to work less than full time through HEE channels.

7.9 Public Health

Public Health trainees working in the community are the responsibility of Norfolk and Norwich University Hospital Trust. Any Form 1 or 2 applications should be authorised by Norfolk & Norwich medical staffing/HR department.

8. Responsibilities and Duties of Trainees

- 8.1 Trainees should understand that LTFT training is not an automatic right and its availability is governed by finite resources.
- 8.2 When applying for LTFT training trainees must ensure all information used in support of their application is accurate and is not in any way misleading. HEE reserves the right to cross-check all information entered onto application forms and any evidence provided.
- 8.3 Trainees should not dictate the terms and conditions of their LTFT training placements to TPDs or Trusts. The process is one of negotiation between all relevant parties, ensuring the requirements of the relevant curriculum are met by the agreed pro-rata basis.
- 8.4 Trainees must ensure that LTFT application forms are completed with three months' notice prior to their planned start date. It is the trainee's responsibility to raise concerns about the progress of an application with the relevant parties.
- 8.5 Existing LTFT trainees must ensure that a new 'LTFT Form 2 – Training Plan Renewal' is completed for planned rotations where there is a move between Trusts.
- 8.6 Trainees should discuss any of the below changes in circumstance with Medical Staffing/HR at the employing Trust, TPD and Educational Supervisor. If any of the below changes are agreed this must be confirmed in writing/by email to HEE by the trainee:
 - a) The planned LTFT start or end date
 - b) Time out of programme including maternity leave
 - c) Resignation from the training programme

9. Responsibilities and Duties of Health Education England, east of England

- 9.1 HEE will treat all applicants equally, regardless of age, disability, gender reassignment, marriage/civil partnership, pregnancy/maternity, race, religion/belief, sex/sexual orientation, or any other discriminatory factor.
- 9.2 HEE is responsible for ensuring that all LTFT training is undertaken in posts and programmes that have been prospectively approved by the GMC.
- 9.3 HEE will manage the LTFT training system in such a way that information pertaining to a LTFT trainee flows between all relevant parties. "Relevant parties" include, but are not limited to; the trainee, Training Programme Directors, Medical Staffing Departments, Finance Officers and internal HEE teams.

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- 9.4 HEE is committed to enabling as many eligible LTFT applicants as possible to train on a LTFT basis. This includes promoting the mainstreaming of LTFT and ensuring that supernumerary placements are arranged only as a last resort.
- 9.5 HEE will endeavour to adapt its policy as required to reflect changes in national guidelines and / or legislative changes relating to LTFT training or part-time working in general. The most up-to-date policy will be accessible on the HEE website.
- 9.6 HEE will instruct Trusts when to raise invoices in relation to uplift funding for slot shares or supernumerary LTFT arrangements.

10. Responsibilities and Duties of Trusts

- 10.1 Trusts are required to invoice for uplift funding for slot share and supernumerary arrangements only when instructed to do so by HEE.
- 10.2 Trusts are expected to treat LTFT trainees no differently from full-time trainees and in accordance with the policies and procedures of HEE/the lead employers.

Document History

Version	Date	Remarks
1.0	August 2011	Adapted with permission from North Western Deanery LTFTT Policy and Guidance
1.1	March 2013	Reviewed by AB, KP
1.2	April 2013	Revised by AB
1.3	Sept 2013	Amended by AB
1.4	December 2014	Amended by AB, SK
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