

LTFT FORUM Newsletter

Welcome...

to the first edition of the
LTFT Forum Newsletter



Forthcoming Events: **Autumn National LTFT Forum**



Tuesday 30th September 2014 10:00 - 3.30pm

The Friends House, Euston Road, London, NW1 2BJ

<http://www.friendshouse.co.uk/>

We very much look forward to seeing you all there!

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Follow up from October 2013 LTFT National Forum

Useful Links following October's meeting

GMC Health & Disability Review

NHS Employers Maternity Guidance

NHS Employers' Guidance Document for Doctors in Flexible Training

AOMRC Flexibility & Equality Survey 2012

RCPCH Guidance for LTFT

RCP Guidance on work/pregnancy

New Representation on the LTFT Forum:

Welcome to our new Dental Representative:-

- Helen Falcon, Chair of COPDEND

Welcome to our new Trainee Representatives:-

- Rep: Dr Françoise Sheppard
- Vice Rep: Dr Ruth Holdstock



Hot Topics on the Agenda for LTFT Forum in September:

Planned workshop on employment matters relating to LTFT to be presented by Jayn Ammantoola & Nikki Omer

Progress update regarding the collaboration of the LTFT Forum & the GMC on Survey Data reporting

RCoA survey data to be presented by Carolyn Evans

Website update

Planned migration from Yorkshire & Humber website to HEEoE website is imminent and website content to be reviewed and updated by HEEoE.

Also plans to develop a web based forum and details will be circulated. Please send your ideas for the website to Mark Baldwin

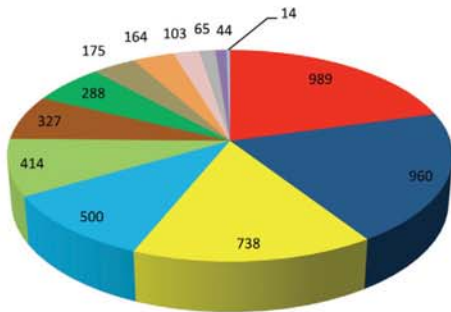
Please send us your agenda items by Tuesday 16th September for the National LTFT Forum Meeting

GMC National Training Survey 2013

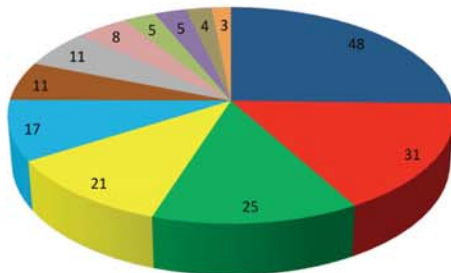
LTFT Headlines

Nationally 86% of LTFT trainees are Female

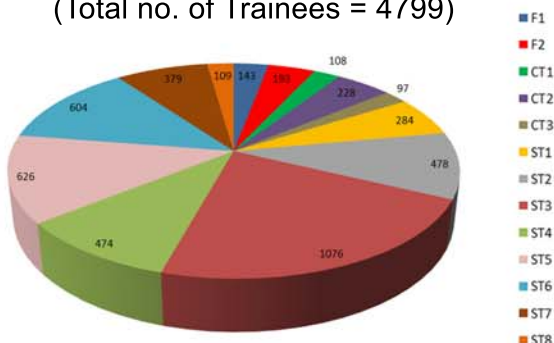
Number of LTFT Trainees by Specialty
(Total no. of Trainees = 4781)



Number of Academic LTFT Trainees by Specialty
(Total no. of Academic Trainees = 189)



Number of LTFT Trainees by Grade
(Total no. of Trainees = 4799)



Here is the overview from 2013. There was a lot more detail circulated (let us know if you would like it to be resent) and we need your help to inform how the survey reports are developed in the future. We will discuss this in September but please consider the following questions to improve the value of quality of this survey data to inform LTFT training.

We would like you to consider the following questions:

1. What information are we trying to capture?
2. How meaningful is the current available data?
3. What format would be helpful in reporting data relating to LTFT?
4. How could the survey questions be amended, or additional guidance be provided?



LTFT Forum Focused Survey 2014

In relation to the GMC National Training Survey we have agreed to look at specific aspects of LTFT training through a focused survey. For 2014 we will be looking at:-

- Arrangements for LTFT
- Eligibility Criteria

A link to this survey will be circulated soon to the LTFT Forum.

Implementation of Secondary Care Postgraduate Medical Tariff in England

Tariff has come into effect from April 2014. This is the national guidance for LTFT regarding the implementation of Tariff:

LTFT trainees

LTFT trainees are funded based on individuals through two mechanisms:

Slot share - where trainees slot share this post should be excluded from tariff and the local LETB tariff maintained (including any study leave payments)

Supernumerary - where LTFT trainee is supernumerary they should be excluded from tariff and the current LETB payment mechanism maintained (including any study leave payments).

We have sought clarity around this guidance and interpret the implementation of this as follows: where LTFT trainees are allocated to existing training posts, then 50% of their salary and the placement fee is included within tariff. Local agreements around slot share and supernumerary posts should be funded in addition and the current LETB payment mechanism maintained.

- It would seem timely to survey current practice with regard to LTFT arrangements ie LTFT in a FT post, slot sharing and supernumerary posts (see P.3).
- Please share your experience with implementation of tariff in relation to LTFT with the forum

GMC Consultation on Part-time Training

The GMC has been working on clarifying the differences between less than full time training and part-time training, with a view to considering the possibility of allowing certain under-subscribed specialties to allow doctors to train on a 'part-time' basis whilst continuing to undertake paid work in the remainder of their time. For example, a doctor may undertake training in Occupational Health on a part-time basis whilst working part-time as a GP. The GMC are currently seeking opinion from key stakeholders across the four UK countries, to which Alys Burns has contributed as the National Lead dean for LTFT. We will keep you updated on the development of this.

Change to Employment Regulations: Right to Request Flexible Working

Are you aware of this? Has it been raised as an issue by your organisation?

A change is planned to flexible working regulations from 30 June 2014 whereby the statutory right to request flexible working will be extended to all employees with 26 weeks service. <http://www.acas.org.uk/index.aspx?articleid=1616>

This has been identified as having the potential to impact on current arrangements for less than full time training. Current guidance does clearly state that all trainees are eligible to apply but must demonstrate a well-founded reason for their request.

There is a consistent basis for prioritisation of these regulations set out in the Gold Guide for what is limited resource both in terms of training capacity and funds. We have sought advice from NHS Employers and received the following response:

All trainees have a right to request flexible working and the employer has a statutory duty to consider applications; but they still have the right to refuse 'if there are business reasons for doing so'. These reasons are set out in legislation and are:

- The burden of any additional costs is unacceptable to the organisation.
- An inability to reorganise work among existing staff.
- Inability to recruit additional staff.
- The employer considers the change will have a detrimental impact on quality.
- The employer considers the change would have a detrimental effect on the business' ability to meet customer demand.
- Detrimental impact on performance.
- There is insufficient work during the periods the employee proposes to work.
- Planned structural changes, for example, where the employer intends to reorganise or change the business and considers the flexible working changes may not fit with these plans.

Whilst the 'well founded reasons' may cover us in the context of doctors in training, there may still be some important issues for us to consider, including:

- Trainees with parental caring responsibilities but who lack NHS continuity of service may not have a statutory right
- Category 2 discretionary reasons for LTFT may now have a statutory right.
- Request to part-time research which the Principles documents explicitly excluded may have a statutory right.

To understand this better we propose:

- 1) To survey current practice with regard to eligibility criteria (see P.3).
- 2) This issue is a formal agenda item for the meeting on 30 September 2014.
- 3) Sharing any experience, further thoughts and discussion by email.