

Study Leave

An overview of the HEE-wide approach



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Background

Study budgets were considered nationally as part of the group for Enhancing Junior Doctors' Working Lives which initially arose to address issues raised by doctors in training as part of contract negotiations in England, and which sat outside of the contract itself.

Through this forum, variable access to study budgets was highlighted as an issue. The working group proposed the implementation of a consistent process to support doctors in training in accessing the education support required to meet their curriculum objectives.

As a result, with effect from April 2018, Health Education England (HEE) announced a new approach for an agreed amount of funding for study budgets to be removed from the Department of Health and Social Care (DHSC) Education and Training tariff (hereafter 'the tariff') placement fee, to be held and managed by HEE within the relevant local office. This top sliced budget was to provide support for all trainees irrespective of post type (tariff or Local Education Provider (LEP) funded).

The purpose of this document is to provide a clear, high-level overview of the Study Leave process and finance management across HEE.

This document is also a refresh of national information released at the start of the 2018/19 financial year with the launch of the new approach to study budgets. It condenses previous communications into one overall document and brings the approach up to date for the 2019/20 financial year.

Which trainees are in scope?

As detailed in the finance section below, the centralised study budget deducted as a top slice of tariff funded posts, is to cover the educational and professional development needs of doctors in training.

These principles apply to all trainees in specialty training, including Palliative Care and Occupational health in NHS funded posts. Public health trainees are not currently in scope. GP trainees are covered in Appendix A.

There are separate budgetary arrangements outside of this tariff for dental trainees, public health, palliative care as well as specialty training level trainees working in primary care settings. Local Postgraduate Deans are responsible for ensuring they are aware of all local budgets used to fund Study Leave and that these budget lines are used.

Less than full time (LTFT) and academic trainees have equitable access to study leave and budgets.

The study budget for military doctors is funded by the Defence Deanery post-Foundation Programme. Costs incurred by the small number of Military Foundation Doctors who apply for and have Study Leave approved locally will be met from the Study budget held at local office level.

It is important to emphasise that, although the funding does not derive from the same sources, the high level principles outlined in this document should be followed for all doctors and dentists in training within HEE. Local Postgraduate Deans are responsible for ensuring the principles are followed.

Study Budgets – Finance Principles

The Department of Health and Social Care (DHSC) has published the 2019/20 Education and Training Tariff which includes details for study budgets.¹

As it was for 2018/19, the Learning and Development Agreements (LDA) payments to Local Education Providers (LEPs) have been calculated thus: £734 x number of commissioned post graduate tariff funded posts + local Market Forces Factor (MFF). The resulting centrally held resource is managed in each local office by the Postgraduate Dean’s staff, to support all doctors in training (as defined in ‘trainees in scope’ section above) including those occupying LEP funded non-tariff posts.

Each HEE local office has appropriate systems in place to date to ensure Study Leave application processes are managed correctly and that expenditure is monitored. This includes an appropriate local process to capture accurate data from each organisation for approved applications so that appropriate reimbursement can be made. Local offices will continue to ensure an effective process for the timely reimbursement of funds. Although working to the same HEE-wide principles outlined in this document, the set-up in each part of England will vary to ensure the most effective fit to the local models (e.g. a Lead Employer model). Re-imbursement for committed study budget funds to an LEP will be done via the established LDA process.

To ensure consistency, have a robust and accurate monitoring process of expenditure and forecast a year end position, each local office, in liaison with HEE Finance, will provide quarterly returns for HEE Deans (HEEDs), HEEDs Senior Managers Group and the HEE Study Leave Working Group.

It is recognised that some local offices will use a reasonable and proportionate amount of the pooled resource for local administrative support where this does not currently exist. A 1.5% top slice for local administration costs associated with HEE managing study budgets is the established HEE-wide position.

The study budgets deducted from the tariff are intended to cover the expenditure of post graduate medical trainees funded by HEE and also by LEPs in placements which are within the remit of the tariff. For avoidance of doubt this excludes the study budget for dental trainees, public health and palliative as well as ST level trainees working in primary care settings. Study budgets for these trainees are drawn up locally and managed as per existing processes.

Overnight allowance

Falling in line with new limits agreed nationally for recruitment expenses, HEE Deans (in liaison with NHS Employers) have agreed the following new limits for approved study expenses:

Allowance	Cost
Overnight allowance (commercial – e.g. B&B/Hotel)	For overnight accommodation within London, the overnight rate should not exceed £150 per night. For overnight accommodation outside of London, the overnight rate should not exceed £120 per night.

These limits apply for all doctors and dentists in training.

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https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/791560/education-and-training-tariffs-2019-to-2020.pdf

Principles for Approving Educational Activities

Study budget reforms were introduced to deliver equity of access to educational resources based on individual need and to facilitate improved quality, efficiency, flexibility and transparency.

In the lead up to April 2018, the principles for approving study-budget-funded educational activities was developed through consultation with trainees, their representative bodies, Royal Colleges, Specialty Advisory Committees and Faculties.

The launch of the new study budgets approach in April 2018 meant moving away from a notional individual annual allocation of study budgets (that had varied across different areas), to implement a system whereby HEE supports:

- All trainees on approved secondary care sector training programmes to achieve their curriculum outcomes, with the same principles applying to trainees in primary care placements.
- Discretionary or career enhancing activity and courses that add value to the individual and support the wider system.

Funding and time for statutory and mandatory training is an employer responsibility and will not come from the study budget.

Under the new system, trainees continue to apply for Study Leave through existing local mechanisms. Placement providers retain the decision as to whether trainees may be released for study leave and it remains a requirement for a trainee to get their Study Leave request approved by their educational supervisor/equivalent.

Requests for Study Leave shall be viewed positively, but with a view to ensuring that the needs of service delivery can be safely met.

With this fundamental change to the study budget approach across England, the educational supervisor/equivalent plays a critical role as they determine, through discussion with the trainees they supervise, the appropriateness of the applications. It is an individualised approach, linked to the Curriculum requirements and the Personal Development Plan of the individual trainee:

- The support required by each individual trainee to achieve their curriculum outcomes should be discussed and agreed by the trainee and supervisor.
- The activity should meet the educational needs of the individual.
- It should be clear how educational activity will support the trainee to achieve their curriculum outcomes and how the activity will help the trainee to improve the care they are able to provide to patients.

Local offices, working with key faculty such as Heads of Schools and Training Programme Directors, will monitor and evaluate the range of funded educational activity undertaken to ensure that it is fit for purpose and is providing quality and value for money.

HEE Position on Study Leave within OOP (Out of Programme)

Historically, it has been the case that trainees on OOP are not normally eligible to apply for study leave.

Having considered the wider changes to study budgets, the current agreed HEE position is that Study Leave time and funding for trainees on OOP, except for OOPT (Out of Programme Training), remains the same i.e not provided.

Applications for trainees on OOPT will only be approved and funded where there is clear evidence linking the application to the specific curriculum requirement for the trainee's individual specialty. The trainee's

base local office will be responsible for approving the study leave and funding/re-imbursing the associated study budget. Where a trainee chooses to take study leave while OOPT, that individual would then not be eligible to apply for, and have funded, that same element again upon re-joining their training programme.

HEE Position on Study Leave within Period of Grace

Doctors will not be eligible for funding from the HEE study budget as these funds are to be used for meeting Certificate of Completion of Training (CCT) requirements. However, doctors can receive study leave time for ensuring revalidation requirements are met.

HEE Position on Courses

There are a variety of courses and conferences available and an increasing number of practices or approaches for a doctor or dentist to complete their training whether these are essential, as part of the curriculum, or aspirational which enhances patient care and/or personal development.

It is recommended that trainees prioritise any educational requirements and personal development. It is expected that they will use their discretion, in accordance with their obligation to demonstrate professional integrity, when applying for a course or conference, after having a discussion with, and gained agreement from, the appropriate local faculty who are responsible for approving study leave. As outlined above, this would usually be the trainee's educational supervisor/equivalent but, depending on the circumstances, proposed applications may require discussion in addition with the Training Programme Director and/or Head of School or, for international requests, the Postgraduate Dean or their delegated deputy.

It has been agreed that HEE will not prohibit attendance at an educational opportunity, conference, or other curriculum or professional development opportunity which is not on an 'approved list'. Lists may be used to give automatic approval to speed up administrative processes. A course being absent from the list does not imply immediate rejection. The decision will remain as within the processes and principles already described in this document.

Guidance may be sought from Royal Colleges and specialist societies if required to support decision making.

Principles for Approved Activities

- Royal Colleges, Specialty Advisory Committees and Faculties should describe expected capabilities and outcomes but not mandate generic or specific courses. High quality locally delivered activity is preferred where possible.
- Royal Colleges, Specialty Advisory Committees and Faculties should recommend a range of educational activities or courses that could be grouped around specific themes aligned to the curriculum that will help postgraduate schools maximise the resource.
- Royal Colleges and LEPs may play a role in delivering courses aligned to the curriculum.
- The 2020 curriculum revision process is an opportunity to review how curriculum outcomes are delivered and what out of placement activities should be supported to achieve those outcomes. Master's degrees may require consideration.
- It is essential that courses are quality assured.

Principles that constitute quality training activity

- Principles should be applied across specialties with the understanding that some specialties will require a greater proportion of the budget than others and that some curriculum stages will require a greater proportion of the budget than others.
- Delivery of curricula objectives based on individual requirements is the primary consideration.

- A good educational activity or course is aligned to the curriculum, receives positive feedback from trainees and faculty and offers value for money.
- Heads of Schools could improve efficiency by delivering local training where possible and release resource to reinvest in aspirational activity.
- Data on current activity should be mapped against curricula to ensure that funds are utilised correctly. This will be essential to deliver quality educational activity that meets trainee and local needs.
- Management and leadership skills development will be supported.
- Periods of private study may be supported if considered helpful

Approach to Exam Preparation Courses

- Exam preparation courses are often funded as historically supported activity that provide clear benefits to trainees. Preparatory courses may provide better value than training extensions and therefore should continue to be supported and should not preclude access to other curriculum required courses or personal development opportunities.

Foundation Training

Study leave will normally be granted flexibly and tailored to individual needs, in accordance with the requirements of the curriculum and the trainee's individual personal development plan.

Study leave for Foundation Year 1 doctors (maximum 15 days) will take the form of a regular scheduled teaching/training session as agreed locally. Additionally, F1 doctors can use up to 5 days of Foundation Programme study leave for tasters to inform future career decision making.

Study Leave for Foundation Year 2 doctors (maximum 30 days) will include periods of regular scheduled teaching/training sessions delivered locally and, for many, no additional support will be needed. Study Leave may also, with the appropriate local approval, include:

- Undertaking an approved external course aligned to the curriculum: this includes an appropriate course enabling the F2 doctor to meet the curriculum requirement for 'initiation and performance of advanced life support' (unless already completed in F1) and occasionally other activity intended to support Foundation doctors achieve their curriculum outcomes.
- Periods of sitting an examination aligned to their future career intention.

Study Leave for Special Circumstances: Aspirational and International Activity

Aspirational Study Leave

The GMC has made clear within its Generic Professional Capabilities (GPCs) framework² that fitness to practise data shows that most concerns about doctors' performance fall into one or more of the nine GPC domains.

Traditional funding of study leave was mapped to domains 1 (professional values and behaviours) and 2 (professional skills). Given the GMC now requires all curricula to be revised and re-approved by 2020 in order to meet the standards set out in Promoting Excellence³, and contain the GPCs, this training can no longer be considered aspirational but core aspects of training.

HEE Deans have agreed that:

- Educational or professional development activities mapping to the above is no longer called 'aspirational'. Going forward, aspirational study leave should be granted for: 'educational or professional development opportunities that enhances the knowledge, skills and attitudes of the doctor in training, or enhances any aspect of patient care, but is not mapped to any direct curriculum requirements'.
- That study leave is granted dependent on the needs of the trainee to fulfil the curriculum. This is not dependent on the previous ARCP outcome.

Given that best practice in many specialties is now shared at European and global meetings, the lack of ability to attend international courses/conferences may hamper advancing of medical knowledge and service development. This may also have the unintended consequence of preventing quality improvement within the NHS.

For these special aspirational circumstances, HEE Deans have agreed that:

- One international conference/meeting, providing all other curriculum requirements are met, will be considered for each doctor in training for any one programme, which can be defined as Foundation, Core, Higher or otherwise every three years (so as not to disadvantage doctors on a run-through programme).
- The educational supervisor should be aware of aspirations and performance to assess whether the request is aligned to the trainee's personal development plan, which may contain items in addition to curriculum requirements.
- Reasonable adjustments and consideration of individual circumstances must be given for aspirational study leave applications (including international) from trainees with protected characteristics.
- For such activities, part-funding may be considered reflecting both HEE and the trainee's commitment to their enrichment.
- HEE funding of postgraduate diplomas and degrees must be rationalised by an established link to the curriculum and a commitment that the qualification will be integral to the doctor's future career.

² https://www.gmc-uk.org/-/media/documents/Generic_professional_capabilities_framework_0817.pdf_70417127.pdf

³ https://www.gmc-uk.org/-/media/documents/Promoting_excellence_standards_for_medical_education_and_training_0715.pdf_61939165.pdf

- If an external body such as a Medical Royal College suggests a doctor in training attends an international conference where not already required by their curriculum, in such circumstances, HEE expects that body to contribute at least 50% of the costs.

Once appeals mechanisms have been used, the decision of the local Postgraduate dean remains final.

International Study Leave

International study leave should occur when the learning outcomes from the course/conference are not available in the UK (joint societies with a UK and Ireland remit for these purposes are considered as UK). The DHSC has made requirements clear in the tariff publication for 19/20.⁴

As specified in the Aspirational Study Leave section above, one international/meeting, providing all other curriculum requirements are met, will be considered for each doctor in training for any one programme, which can be defined as Foundation, Core, Higher or otherwise every three years.

If attending an international opportunity is evidenced to be cheaper than a UK alternative/equivalent, then the international opportunity will usually be approved and would not count as the one occurrence above.

If service requirements prevent a trainee in attending a UK based educational opportunity, an international alternative/equivalent could be considered.

HEE Deans have agreed the following principles:

Attendance at courses/conferences should be taken as close to the base of the trainee as possible.

For approved international study leave applications, HEE will consider funding **either** the full cost of the course/conference fees **or** the full cost of economy travel and accommodation whichever is the lower amount. For accommodation, in alignment with the agreed maximum rate for study budget claims within the UK, the overnight rate should not exceed £150 per night. Subsistence expenses will not usually be reimbursed by HEE.

As part of the approvals process, requests to attend overseas study courses/conferences will only be considered in very exceptional circumstances. Such circumstances include:

- for the presentation of significant research findings from within an NIHR recognised academic clinical fellowship or clinical lectureship
- for the presentation of research undertaken as part of a clinical training programme
- where the training course is not available in the UK
- where the course or activity is part of the college curriculum or guidelines on required training
- where the course is set out as a mandatory requirement of college training to reach the required qualification to practice

For international study leave requests where the individual will be presenting, such applications should take priority.

The course/conference must provide a clearly stated curriculum outcome and there must be a documented discussion with the ES about the clear need of the course/conference to meet curriculum requirements.

A full programme should be provided. A report covering the entirety of the leave may be requested from the doctor in training after attendance.

⁴https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/791560/education-and-training-tariffs-2019-to-2020.pdf

Any contribution to funding of such leave will need the prior written approval of the HEE local Postgraduate Dean.

If further periods of international study leave are required this will be considered on a case by case basis by the Postgraduate Dean, and budget allowing.

If a doctor in training wishes to fund a period of international study leave by other means, the ES should still ensure the activity aligns to the curriculum or personal development plan. This must be the case for any period of international Study Leave irrespective of how it is funded.

Appendix A: Study leave for GP trainees – general principles

GP Trainees are referred to the national principles for study leave and local processes. In all areas, the following principles should apply:

- GP doctors in training should discuss their progress, aspirations and intentions regularly with their Educational and Clinical Supervisors. This should entail discussions in general terms at every Educational Supervision meeting, with more detailed discussions with their CS at the start and of every placement. These discussions should be reflected in their PDP.
- In general GP doctors in training should be meeting core curriculum requirements before considering discretionary enhancement activity. Aspirational activity is defined in the general study leave documents.
- GP Trainees who are progressing satisfactorily may wish to develop an interest in a particular specialty and undertake a limited amount of training to that effect, but they should ensure that this does not hinder their progress or detract from their study of the core GP Curriculum. At all times (with the sole exception of taking an exam or when so advised by a TPD), the Regional Teaching Course provided by the local School should take precedence.
- Attendance at the School's Regional Teaching courses and educational supervision with their GP trainer are **mandatory** (ref GMC Promoting Excellence standard R3.12: Doctors in training must be able to take study leave appropriate to their curriculum or training programme, to the maximum time permitted in their terms and conditions of service).
- Trainees should apply in the way described in the local policy using the form specified in that policy, with the general variations that:
 - GP doctors in training do not need TPD or ES approval to attend individual courses