**Hillingdon GP VTS LTFT Training Guide**

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‘The purpose of Less than Full Time training (LTFT) is to keep doctors in training where full-time training is not practical ... LTFT trainees must meet the same requirements in general practice training as full-time trainees... Essentially, LTFT and full-time trainees follow the same curriculum and will have the same requirements for completion of training.’

(LTFT training for London and the South east applicant guide)

Table of Contents

1. Aim
2. Applying for LTFT Training
   1. Application Steps
   2. Eligibility
      1. Criteria 1
      2. Criteria 2
3. Rota Calculation
   1. How To Calculate Your LTFT Rota In Hospital
      1. Slot Share
      2. Reduced Hours (non-slot share)
   2. How To Calculate Your LTFT Work Pattern In GP
4. Annual Leave/ Bank Holiday Calculation
5. Maternity Leave
   1. Maternity Leave Entitlements
   2. Shared Parental Leave
   3. Antenatal Care
   4. How To Apply For Maternity Leave
6. KIT Days
7. Supported Return To Training
8. FAQ’s
9. Useful Contacts
10. Useful Information
    1. Discounted Professional Fees
    2. Support Online and References
11. Aim

The aim of this guide is to improve information about LTFT training within the Hillingdon VTS scheme.

1. Applying for LTFT training

<https://lasepgmdesupport.hee.nhs.uk/support/home>

When applying for LTFT training you should do so via the PGMDE support portal. There is an applicant guide and LTFT application form, these can be found under ‘London/KSS’ then ‘Trainee’ then ‘Less than full time’.

1. Application steps
2. Before applying you must inform the Programme Directors of your intention to train LTFT or change the percentage LTFT worked.
3. Ideally you will start as LTFT from the start of the next rotation, or when returning from maternity leave. The amount of notice required before the LTFT start date is:
   * Category 1 – 16 weeks’ notice
   * Category 2 – 6 months’ notice
4. Complete the online application form (very quick and easy!)
5. You will be notified of your approval to work LTFT
   * Category 1 – within 10 working days
   * Category 2 - within 30 working days
6. Once approved, discuss with hospital/GP rota coordinator to create appropriate rota and agree days worked

You are able to change your LTFT percentage if your circumstances change, however you will need to re-submit an application form via the portal and the notice period is the same as above.

1. Eligibility
   * 1. Category 1

* Disabled or in ill health (this may include those on in-vitro fertility programmes).
  + Need a letter on letter headed paper from your doctor dated within 3 months stating the nature of your disability
* Caring for an ill/disabled child, partner, relative or other dependent.
  + Letter on letter headed paper from the dependant’s doctor dated within 3 months that states the level of care required
* Personally, caring for a child aged 18 or younger
  + Need to state due date or actual DOB of youngest child on application form. No need to supply birth certificate.

1. Category 2

* Unique opportunities for their own personal/professional development, e.g. training for national/internal sporting events.
* Religious commitment – involving training for a particular role which requires a specific time commitment.
* Non-medical professional development such as management courses, law courses, fine arts courses, etc.
* Other well-founded reasons may also be considered by the Postgraduate Dean
  + Proof required – need to complete free text boxes on application form and can attach supporting documentation if you wish.
  + You will need to renew your approval to train LTFT under category 2 annually.

1. Rota calculation

General considerations when planning which days to work

* You will need to negotiate this with each department you rotate to and may need to consider changing days when you change rotation.
* Days worked do not always have to be consecutive e.g. Tuesday, Wednesday, Friday.
* There are different training opportunities on each day of the week e.g. departmental teaching.
* Your working days should include a Tuesday afternoon in order to attend the GP VTS half day release teaching programme.
  1. How To Calculate Your LTFT Rota In Hospital
* You should work your percentage of the average weekly hours completed by your full-time colleagues. For example, **if** full time is 48 hours per week, the maximum you would be expected to work is outlined below depending on your LTFT percentage.

|  |  |
| --- | --- |
| **% LTFT** | **Weekly hours** |
| 80% | 38.4 |
| 70% | 33.6 |
| 60% | 28.8 |
| 50% | 24 |

This table is based on an example where the Full time average weekly hours are 48 hours.

* Before starting the rotation all LTFT trainees should create a bespoke rota in conjunction with the rota coordinator. You will then need to complete the LTFT flexi-grid (which will be sent to you via HR). HR will incorporate this into the DSR4 software which will ensure you contract compliance and that you are paid appropriately.
* During your hospital placement, the on-call hours may vary according to whether or not you have a slot share.
  + 1. Slot- share

If you have a slot share, you and your slot share partner would be expected to cover 100% of the rota slot. This means that each of you would need to cover their percentage of LTFT for the regular shifts and 50% of on-calls. The full on-call rota will need to be covered by yourself and your slot share partner. This will require planning and negotiation therefore early discussions are advised (i.e. Slot share 1 working at 80% would do 80% of regular shifts and 50% of on-calls, slot share 2 working at 60% would do 60% of regular shifts and 50% of on-calls).

* + 1. Reduced Hours (non-slot share)

If you have a slot to yourself, you would be expected to work your LTFT Percentage of regular shifts and on-calls (i.e. a trainee working at 80% would be doing 80% of on-calls and 80% of the regular shifts). This should be stated on your work schedule. You should work approximately your LTFT percentage of each shift type (this includes long days, nights, weekends, zero/rest days) on the rota compared to your full-time colleagues**.**

* 1. How To Calculate Your LTFT Work Pattern In GP
* Full time in GP is 40 hours per week so a LTFT trainee should work the total hours as below.

|  |  |
| --- | --- |
| **% LTFT** | **Weekly hours** |
| 80% | 32 |
| 70% | 28 |
| 60% | 24 |
| 50% | 20 |

* It is up you to negotiate with your practice how these hours should be split. For example, you could work 70% across three and a half days of 8 hours each, or you could work 70% over 3 days of 9-10 hours each.
* Full time in GP should include 7 sessions seeing patients, 1 session VTS, 1 session tutorial and 1 session private study. This should all be pro-rata for LTFT trainees. So roughly 70% of your working week should be spent seeing patients, with 30% spent on education time. Again, you should negotiate with your practice what your working pattern will be.

1. Annual Leave/Bank Holiday Calculation

* Annual leave entitlement for full time trainees is 27 days per year plus 8 days Bank Holiday entitlement. After 5 years NHS service this increases to 32 days per year plus 8 days bank holiday entitlement.
* To calculate your leave entitlement per rotation, multiply the number of days annual leave by your LTFT percentage. For example, if you are working a 6-month rotation, working at 60% and have worked for the NHS for more than 5 years:  
  32/2 = 16 days annual leave in 6 months

16 x 0.6 = 9.6 days annual leave in 6 months

* If you have negotiated to work your LTFT percentage over fewer days but work longer hours (for example, LTFT 80% but worked over 3 days of 10-11 hours each) you may need to take your annual leave in hours, where each day of annual leave counts as a normal working day of 8 hours.
* To calculate Bank Holiday entitlement, you should multiply the number of bank holidays in that rotation by your LTFT percentage. For example, if there are 4 bank holidays and you are training at 60%, 4 x 0.6 = 2.4 days bank holiday entitlement. This way it is fair to all trainees regardless of which days of the week you would normally work.
* Often it is helpful to add together annual leave and bank holidays, for example a 60% trainee who has worked in the NHS for more than 5 years will get 9.6 days annual leave and 2.4 days bank holidays = 12 days leave per 6 months.
* If you already have a bank holiday off it will count as one of these days of leave. However, if you are working a bank holiday, or it falls on your non-working day, you are entitled to take it in lieu.
* Study leave is also calculated pro-rata. Full time trainees get 30 days a year.
* Study budget and the application process is the same as that of full-time trainees.

1. Maternity Leave

<https://www.nhsemployers.org/tchandbook/part-3-terms-and-conditions-of-service/section-15-leave-and-pay-for-new-parents-england-wales-and-scotland>

* 1. Maternity Leave Entitlements
* All employees have the right to 52 weeks of maternity/adoption leave, or up to 52 weeks shared parental leave.
* You will be entitled to paid and unpaid leave if you have had 12 months continuous service with one of more NHS employers at the beginning of the 11th week before the expected week of childbirth.
* You must notify your employer (Royal Free) in writing before the end of the 15th week before the expected date of childbirth. You must inform them of the date you wish to start maternity leave. This can be any date from the beginning of the 11th week before the baby is born. You must provide a MATB1 from your midwife or GP giving the expected date of childbirth.
* You can start maternity leave any time between the beginning of the 11th week before childbirth and the expected date of childbirth. You can change this start date but must give 28 days’ notice if possible.
* Maternity leave pay is as follows:
  + 8 weeks full pay (minus any Statutory Maternity Pay or Maternity Allowance)
  + 18 weeks half pay (plus any Statutory Maternity Pay or Maternity Allowance)
  + 13 weeks Statutory Maternity Pay or Maternity Allowance
  + 13 weeks unpaid
* You will accrue annual leave (and bank holidays) which are paid and must be taken at the end of the maternity leave.
  1. Shared Parental Leave
* Shared parental leave for the partner can be taken anytime within one year of the birth of the child.
* You will be entitled to paid and unpaid leave if you have had 12 months continuous service with one of more NHS employers at the beginning of the 11th week before the expected week of childbirth.
* You must notify your employer (Royal Free) of your wish to take shared parental leave and provide eight weeks’ notice of the dates you wish to access shared parental leave.
* Shared parental leave pay is the same as maternity pay, minus the initial 2 weeks which must be taken by the mother. This is the maximum joint entitlement which can be taken or shared by either parent.
  1. Antenatal Care
* Pregnant employees have the right to paid time off for antenatal care. This includes parent-craft classes.
* The pregnant employee’s partner is entitled to unpaid leave to attend two antenatal appointments, to a maximum of six and a half hours per appointment.
  1. How To Apply For Maternity Leave
* Go to the PGMDE support portal and submit an enquiry detailing the start date of your maternity leave and a provisional return date. You should also inform the TPDs and your current rotation of your intended start date.
* You should have a meeting with your educational supervisor prior to leaving and complete the pre-absence form at <https://www.lpmde.ac.uk/professional-development/inductreturnretain/rtp/rtp-suppoRTT>

1. KIT Days

* You should contact your current employer (The Royal Free) if you would like to arrange Keep in Touch (KIT) days. It might be most helpful to do these within the rotation you are coming back to, speak to the local team and Programme Directors to arrange this.
* You are allowed up to 10 paid KIT days. These must be taken within the ‘maternity leave’ part of your maternity leave and not during the ‘accrued annual leave’ at the end, or you will not be paid as you are already being paid for your annual leave.

1. Supported Return To Training

Hillingdon GPVTS recognises that many trainees will require time out of training for various reasons such as sickness, parental leave, research or career break, working abroad.

The Supported return to training (SuppoRTT) programme has been set up to assist those who have taken time out. The programme recommends a pre-absence meeting and a pre return-to-training meeting with your educational supervisor or training programme director. During these meetings, discussions will take place to plan the return-to-training process and discuss trainee needs such as supervised clinical sessions, flexible work arrangements and coaching/mentoring.

Please refer to this link of you are planning a period of absence. <https://www.lpmde.ac.uk/professional-development/inductreturnretain/rtp/rtp-suppoRTT>

If you are returning to a hospital post, please contact Dr Menakaya [jide.menakaya@nhs.net](mailto:jide.menakaya@nhs.net) (Consultant paediatrician and Internal SuppoRRT champion).

1. FAQ’S

**What happens if my child is unwell?**

If your child becomes unwell, please contact your department as soon as possible to explain the situation. This leave would either be taken from your annual leave allowance or it will be unpaid. Please also familiarise yourself with the following guidance for applying for unpaid parents leave: <https://www.gov.uk/parental-leave/entitlement>

**How many hospital rotations will I need to do?**

According to the RCGP GP trainees need to complete a minimum of 12 months whole time equivalent (WTE) in a hospital setting and 12 months WTE in a GP setting with a total of 36 WTE months in order the qualify. However, London offers an 18/18month WTE split. This means that you may be required to complete an extra hospital placement compared to your Full-time equivalent colleagues. Trainees should be given a 4-month advance notice as to which placement they will be offered.

**Do I have a choice of rotations?**

* Where possible you should follow the rotations, you were assigned initially when you were offered the training programme.
* If you go on maternity leave you will ‘lose’ your rotations from that point onwards.
* If you would like to be considered for specific rotations that you feel would best suit your training needs, it is best to speak to the Programme Directors well in advance of rotation allocation.

**How will training LTFT affect my total training time?**

* You will still have to do the same amount of ‘Whole Time Equivalent’ (WTE) training, i.e. 36 months.
* Multiply the percentage training by the length of the placement to get the WTE, for example LTFT at 70% for 6 months, 0.7 x 6 = 4.2 months.
* Then add up all of your placements in WTE to get your total training time.
* This will mean your transition from ST1 to ST2 and ST2 to ST3 will be ‘out of sync’, i.e., it will happen randomly halfway through a placement.
* You will only have one 6-month placement in GP during ST1/2.
* If this was originally meant to be ITP then you will miss the ‘ITP’ part of the placement and just work in GP.
* From the 6-month placement where you turn ST3 onwards you will be placed in GP.
* You are allowed to work locum shifts on top of your LTFT hours.
* You should still have an ARCP every calendar year.
* Workplace based assessments and portfolio requirements are all pro-rata.

1. Useful contacts

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| --- | --- | --- |
| Dr Peter Joseph | Training Programme director | [peterjoseph@nhs.net](mailto:peterjoseph@nhs.net) |
| Dr Asoka Wijayawickrama | Training Programme director | [a.wijayawickrama@nhs.net](mailto:a.wijayawickrama@nhs.net) |
| Dr Sue Thurlow | Training Programme director | [s.thurlow@nhs.net](mailto:s.thurlow@nhs.net) |
| Deborah Noel | Medical administrator | [deborahnoel@nhs.net](mailto:deborahnoel@nhs.net) |
| Faizaan Firozdin | HR medical staffing at Hillingdon Hospital | [faizaan.firozdin@nhs.net](mailto:faizaan.firozdin@nhs.net) |
| Dr Tristan Bate | Consultant Champion of Flexible Training | [tristanbate@nhs.net](mailto:tristanbate@nhs.net) |
| Dr Liz Homer | Paediatric SpR Trainee and BMA LTFT rep | [Elizabeth.homer1@nhs.net](mailto:Elizabeth.homer1@nhs.net) |
| Dr Lisa Miller | HEE LTFT lead for NW London | [Lisa.miller@hee.nhs.net](mailto:Lisa.miller@hee.nhs.net) |
| Dr Menakaya | Consultant paediatrician and Internal SuppoRRT champion | [jide.menakaya@nhs.net](mailto:jide.menakaya@nhs.net) |
| Dr Alex Bailey | Consultant psychiatrist and LTFT CNWL champion | [Alex.bailey@nhs.net](mailto:Alex.bailey@nhs.net) |

1. Useful Information
   1. Discounted Professional Fees

* If you earn less than £32,000 (gross annual income from all sources) you can apply for discounted GMC fees. This will apply to most people on maternity leave.
* If you work at 75% LTFT or less, you can apply for discounted AiT RCGP fees. If you are on maternity or parental leave you can also apply for discounted AiT RCGP fees.
  1. Support Online and References
* ‘LTFT Trainees Forum’ on Facebook is a good resource for queries about LTFT rota, training or pay problems.
* The BMA website has some useful information under ‘Flexible working and LTFT’.
* <https://www.bma.org.uk/advice/employment/contracts/junior-doctor-contract/rostering-guidance/roster-design-for-ltft-doctors>
* <https://www.lpmde.ac.uk/professional-development/inductreturnretain/rtp/rtp-suppoRTT>
* <https://drive.google.com/drive/folders/1ddVr8WlL8ldActg7KW6SKWDQ0WvUMg6P?fbclid=IwAR2WqVn5BR_XYIbZt0yGLUEVGoRFddnITZEd2y6zfqCeNhieNKxSStJzR3w>