

**NHS England
(Northwest Office)**

Postgraduate Medical and Dental Education

Study Leave Guidance 2023

HSE	Study Leave Guidance
Purpose	A guidance document that gives an overview of the approach taken in-NHSE North West Office to study leave; provides information on process for TPDs, Heads of School, study leave administrators and Postgraduate Doctors in Training .
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Date of Issue	V2 July 2023
Location	Guidance 2023 Website: https://www.nwpgmd.nhs.uk/policies-procedures
Version Control	Version 1: 18.07.2017 Version 2: 07.2023
Review Date	2 years from publication

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1. Introduction

- 1.1 This document has been designed to assist primarily Training Programme Directors (TPDs), Educational Supervisors, Clinical Supervisors, Rota Coordinators and Specialty Study Leave Administrators when considering applications for study leave; to ensure the budgets are used effectively to promote learning and to ensure equity of access for Postgraduate Doctors in Training working in Greater Manchester, Lancashire & South Cumbria and Cheshire & Mersey. However, it will also assist Postgraduate Doctors in Training who are applying for study leave, enabling them to be aware of the key principles underlying study leave and how the process works within NHSE Northwest Office.
- 1.2 The document provides guidelines that need to be considered when dealing with applications for study leave. It is not envisaged that these guidelines will form a series of written answers to every issue involved in the granting of study leave. The guidelines are based on the common principle that study leave should be taken in the context of the whole specialty programme and decisions are informed by the individual trainee's circumstances and the needs of other Postgraduate Doctors in Training on the programme.

2. Application to Postgraduate Medical and Dental Training Programmes

- 2.1 This document outlines the general principles behind the study leave process but there are variations in eligibility/process/application forms across the different training programmes. Therefore:
 - Hospital and community care Postgraduate Doctors in Training should check the specific issues relating to their specialty programme here: <https://www.nwpgmd.nhs.uk/study-leave>
 - Public Health Postgraduate Doctors and Learners can also check <https://www.nwpgmd.nhs.uk/study-leave>
 - Foundation Postgraduate Doctors in Training should check the specific issues relating to the Foundation Programme here: <https://www.nwpgmd.nhs.uk/foundation-policies-and-processes>
 - General practice (GP) Postgraduate Doctors in Training should check the specific issues relating to the General Practice Programme here: <https://www.nwpgmd.nhs.uk/gpst-study-leave>
 - Postgraduate Dentists in Training should check the specific issues relating to the different dental training programmes here: <https://www.nwpgmd.nhs.uk/dental-study-leave>

3. Context

- 3.1 Study leave is not an entitlement but an allowance. However, the GMC's *'Promoting Excellence'* states that '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.' Therefore, all requests for study leave will be considered appropriately by the employer, ensuring that service delivery can be safely maintained.
- 3.2 The GMC has also developed the *'Generic professional capabilities framework'*, in close association with the Academy of Medical Royal Colleges. It prioritises themes such as patient safety and quality improvement, identifying outcomes which are generic across all postgraduate medical curricula. To achieve CCT, Postgraduate Doctors in Training will be required to demonstrate satisfactory achievement of the generic outcomes defined by the framework. There are 9 domains in the framework, with domain 1 requiring Postgraduate Doctors in Training to maintain 'their continuing professional development' and domain 3 requiring Postgraduate Doctors in Training to participate 'in continuing professional development to keep their knowledge, skills and capabilities up to date'. Study leave may facilitate participation in relevant educational activities, enabling Postgraduate Doctors in Training to meet these generic outcomes.
- 3.3 Study leave is a key element in preparing and maintaining skills and overall competence, but it should not be seen in isolation. It needs to be included within an overall educational programme incorporating clinical supervision, locally arranged teaching, audit, case conferences and journal clubs. Study leave represents the additional component, through which Postgraduate Doctors in Training can request time away from programmed activities in the workplace to attend other educational activities. For Postgraduate Doctors in Training on the 2002 contract, study leave is defined in *'The Terms and Conditions of Service for Hospital Medical and Dental Staff'*, paragraphs 250 – 254. For Postgraduate Doctors in Training on the 2016 contract, study leave is defined in the *'Terms and Conditions of Service for NHS Doctors and Dentists in Training (England) 2016'*, schedule 9, paragraphs 29 – 39.
- 3.4 These educational activities may involve the payment of course/conference fees, and in that situation the trainee can request a contribution, or in some cases the whole fee. The extent of support will be based primarily on the contribution the educational activity makes to an overall training plan with explicit objectives, but within an overall financial framework to ensure equity between Postgraduate Doctors in Training and specialties. This financial allocation is not an entitlement but an allowance; it is for each TPD to decide how to manage the budget allocated to their training programme. Please note that exam fees are not eligible for funding from the study leave budget.

4. Purpose of Study Leave

- 4.1 The COPMeD Study Leave Guidelines inform HEE NW's approach to study leave and the key principles are outlined below. Study leave should:
- Enhance learning.
 - Normally be planned as an integral part of a training programme (which would include work-based and multi-professional learning opportunities).

- Where offered within a training programme, be accompanied by an expectation that Postgraduate Doctors in Training take up these opportunities (a minimum of 70% attendance is commonly required).
- Be used to provide education and training not otherwise easily acquired in the workplace setting.
- For most Postgraduate Doctors in Training, include a majority component that is defined as essential for the specialty or programme, with a proportion remaining for tailoring to individual needs; where considered integral to the training programme e.g. Foundation programmes or general practice training, Postgraduate Doctors in Training should continue to have access to teaching and training delivered in the work place or department
- Where study leave is integral to a programme, the extent to which this subsumes part of the annual number of days available for study leave should be made explicit e.g., in the programme literature provided during recruitment and selection.
- Routinely be part of the appraisal dialogue, and outcomes may contribute to assessments.
- Be part of the documentation accumulated by doctors for revalidation.

4.2 Postgraduate Doctors in Training should note that they must attend the teaching provided for them within their programme and should aim to meet, if not exceed, 70% attendance. Postgraduate Doctors in Training who fail to meet the required attendance for their teaching programme without good cause may be refused other applications for study leave.

5. Planning Study Leave

5.1 Each trainee should meet with their educational supervisor early in each placement to discuss the trainee's aspirations and learning needs, together with the formal and informal learning opportunities available in the placement. This discussion should inform the development of an individualised learning plan which should take account of the following:

- The individual aspirations and career aims of the Postgraduate Doctor in Training.
- The need to meet national expectations and curricula (e.g., as laid down by the Faculties/Royal Colleges)
- The needs of the NHS to have a workforce delivering effective clinical care.
- The needs of the clinical department in which the Postgraduate Doctor in Training is working.
- The need to acquire those generic skills essential to effective contribution to, and function within, an evolving NHS.

- 5.2 A Postgraduate Doctor's in Training study leave programme should be regarded as one component of this planned educational programme. It should be an opportunity for Postgraduate Doctors in Training to access education and training not easily acquired in their clinical workplace and includes formal bleep free learning events. It should enable a Postgraduate Doctor in Training to attend specialised courses, training, and meetings.
- 5.3 It is anticipated that Postgraduate Doctors in Training will meet regularly with their clinical or educational supervisors to review progress towards meeting their educational objectives set out in their learning plan. It is therefore acknowledged that the need to apply for study leave to facilitate access to a specific learning opportunity may change during a placement, as not all learning needs may be identified at the initial meeting. TPDs should take a flexible approach that supports individual Postgraduate Doctors in Training, whilst ensuring fairness and equity with other Postgraduate Doctors in Training on the programme.
- 5.4 Study leave should be taken as near to the workplace as possible for any given learning opportunity.
- 5.5 Postgraduate Doctors in Training are advised that it is helpful to the TPD, and specialty study leave administrator if they submit a copy of their learning plan along with their study leave application, although this is not a requirement.

6. Eligibility

- 6.1 All Postgraduate Doctors in Training (except foundation year 1) are eligible for study leave and funding for educational activity relevant to their curriculum.
- 6.2 Postgraduate Doctors in Training working Less than Full Time (LTFT) can access study leave and funding on a pro-rata basis, as outlined below.
- 6.3 Postgraduate Doctors in Training undertaking academic training programmes, such as Academic Clinical Fellows or Academic Clinical Lecturers, are eligible for study leave. Such placements are incorporated into a training programme recognized by the GMC. They have a clinical component sufficient for the placement to contribute towards a Certificate of Completion of Training (CCT) on an equal basis to other clinical placements. Study leave is available on the same basis as other Postgraduate Doctors in Training on the training programme for the clinical component; funding for study leave relating to the research component is a separate arrangement funded via NIHR bursaries which are managed by the relevant University. TPDs will identify Postgraduate Doctors in Training undertaking academic training programmes and distinguish them clearly from Postgraduate Doctors in Training undertaking Out of Programme **Research** (OOPR) placements.
- 6.4 Individuals within a Period of Grace are not eligible for funding from the NHSE study budget as these funds are to be used for meeting Certificate of Completion of (Specialty) Training requirements. However, individuals can receive study leave time for ensuring revalidation requirements are met.

- 6.5 Whilst F1 Postgraduate Doctors in Training are not eligible for funding, those in the third placement of their F1 year can access up to 5 days study leave in support of career 'taster' sessions, with the time recouped from their F2 study leave allowance.
- 6.6 Postgraduate Doctors in Training who are absent from work for the following reasons are not generally eligible for study leave:
- maternity/paternity leave
 - sick leave
 - adoption leave
 - compassionate paid/unpaid leave
 - any other paid or unpaid leave i.e., jury service.
- 6.7 However, in exceptional circumstances, study leave may still be possible for some Postgraduate Doctors in Training in the above categories. Postgraduate Doctors in Training should seek clarification of the contractual and medical indemnity issues with the relevant Lead Employer and the provider of the course/conference/educational programme which they have applied to attend. This should then be shared with the TPD to inform the decision-making process.
- 6.8 Historically, it has been the case that Postgraduate Doctors in Training on OOP are not normally eligible to apply for study leave.

It may be appropriate for Postgraduate Doctors in Training to access Supported Return To Training ('SuppoRTT') funding/opportunities in preparation for returning from OOP. Currently, the NHSE position remains that individuals on OOP are not eligible for study leave time and funding, except for OOPT (Out of Programme Training).

In exceptional circumstances and at the discretion of the Postgraduate Dean, study leave funding during other OOP types may be considered for curriculum-based activity. Applications for individuals on OOPT will only be approved and funded where there is clear evidence linking the application to the specific curriculum requirement. Where uncertain, this will be at the discretion of the 'base' Postgraduate Dean.

- 6.9 NHSE offers funding to trainees wishing to attend educational activities which will be of benefit to them on their return to training as well as funding for activities that are only available whilst they do not have access to their usual study leave budget (i.e. on parental leave etc.) as part of the Supported Return to Training (SuppoRTT) Programme.

Further details can be accessed via this link: [Return to Training Activities \(RTT-A\) | Health Education North West \(nwpgmd.nhs.uk\)](https://www.nwpgmd.nhs.uk/return-to-training-activities-rtt-a/)

- 6.10 Study leave is not generally available for NHS initiatives such as audit meetings, CEPOD and clinical governance activities. Nor is it available for ALS, ATLS etc unless required by the curriculum.

When either ALS certification or possessing adult life support capabilities is a mandatory curriculum requirement, a relevant course aligned to current Resuscitation Council UK (RCUK) guidelines will be funded from the study leave budget up to certain amount agreed by the National Study Leave Group.

When current ALS certification is required by the trainee's LEP/employer but ALS certification or possessing adult life support capabilities is not a curriculum requirement, (for example, when GP doctors in training are in acute medical placements), the LEP should be responsible for funding ALS and the time spent undertaking the course should not come out of the individual's study leave time allowance.

7. International Study Leave

- 7.1 Postgraduate Doctors in Training can apply for International Study Leave 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 UK).

However, there are circumstances that should be considered flexibly by TPDs.

Higher Postgraduate Doctors in Training who have the opportunity to present their work in an international forum are advised to discuss this with their TPD at the earliest opportunity.

TPDs may also consider supporting European events that provide quality learning opportunities which are better value for money than similar events in the UK. In some smaller specialties it can be difficult to achieve significant critical mass for events within the UK and in such specialties TPDs may consider supporting attendance at European events that are particularly relevant to the specialty.

- 7.2 One international/meeting, providing all other curriculum requirements are met, will be considered for each Postgraduate doctor in training for any one programme, which can be defined as Foundation, Core, Higher or otherwise every three years in line with National guidance.
- 7.3 The final decision on support for overseas events rests with the relevant Deputy Dean, on behalf of the Postgraduate Dean.
- 7.4 Study leave will not be approved to attend exams overseas.
- 7.5 Postgraduate Deans have agreed the following principles for international applications:

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

For approved international study leave applications, NHSE 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 rate for study budget claims within the UK, the overnight rate should not exceed £120 per night. Subsistence expenses will not usually be reimbursed by NHSE.

As part of the approvals process, requests to attend overseas study courses/conferences will be considered in the following circumstances.

- 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 by the TPD from the doctor in training after attendance.

Any contribution to funding of such leave will need the prior written approval of the NHSE local Postgraduate Dean or deputy. If further periods of international study leave are required this will be considered on a case-by-case basis by the Postgraduate Dean or deputy, 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.

8. Study Leave Days (Allocation)

8.1 Study leave is generally limited to 30 days per year for full time Postgraduate Doctors in Training and is calculated pro-rata for LTFT Postgraduate Doctors in Training. For example, a Postgraduate Doctor working LTFT at 60% would have an allowance of 18 days per year.

Should a LTFT Postgraduate Doctor take Study Leave on a 'zero' day (non-working day) this time can be claimed back. This needs to be negotiated with the Postgraduate Doctors placement Trust.

For study leave taken over weekends, bank holidays and days when the trainee would not otherwise be working, trainees can either take the time off in lieu or not count it as a study leave day (so that they don't use up any days from their study leave allowance).

8.2 When calculating study leave all the days carrying a liability for expenses are counted, including weekends and bank holidays. Time spent travelling to and from the event is also counted.

8.3 Some of the time may be taken up by the days allocated to the specialty's training programme, with different specialties allocating varying periods of time. Postgraduate Doctors in Training are advised to check with their TPD to clarify the number of days these will take from the annual allowance.

8.4 Postgraduate Doctors in Training do not need to submit applications for leave to attend the specialty's teaching programme. However, TPDs may organise additional specific training events such as a skills workshop, where economies of scale make it more beneficial to organise an event for a number of Postgraduate Doctors in Training on the programme. The TPD will arrange funding via NHSE NW Office but Postgraduate Doctors in Training will still need to apply for study leave.

8.5 Study leave includes but is not restricted to participation in:

- Study (usually but not exclusively on a course or programme)
- Research
- Teaching
- Examining or taking examinations
- Attending specialist clinics
- Attending professional conferences for educational benefit
- Rostered training events.

8.6 Full time Postgraduate Doctors in Training may take up to 7 days for private study (for example, revision for exams). The allowance for LTFT Postgraduate Doctors in Training is calculated pro-rata.

- 8.7 The study leave year runs from August to July. The time will be taken from the leave year in which the 1st day of the study leave falls and not from the year in which it was applied for.
- 8.8 Postgraduate Doctors in Training should be aware that where study leave with pay is granted, they must not undertake any remunerative work.

9. Study Leave Expenses (Funding)

- 9.1 The study leave budget for the training programme is based on a notional allocation for each post within the programme. For full time hospital specialty and F2 Postgraduate Doctors in Training this is **£767** + Market Forces Factor (MFF) per year but some specialties may top-slice this to support educational activities such as the regional teaching programme. Postgraduate Doctors in Training are advised to check with their TPD to see if this is the case for their programme, so they are aware of the individual allowance available. GP and dental Postgraduate Doctors in Training should check the relevant webpage as outlined in section 2 to clarify the funding available during their training programme.
- 9.2 Postgraduate Doctors in Training working LTFT should only have access to the same total amount of funding for the duration of their training programme as full time Postgraduate Doctors in Training have for the duration of their training programme. The study leave budget for LTFT Postgraduate Doctors in Training needs to be amended and monitored by TPDs accordingly.
- 9.3 Study leave funding is not available for exam fees; but travel, accommodation and subsistence can be applied for. For first and second attempts leave with pay and expenses can be applied for. Subsequent attempts are eligible for unpaid leave only. Study leave and expenses are not available to Postgraduate Doctors in Training undertaking a duplicate qualification such as a second MRCP. If a training programme provides a day-release or pre-examination course as part of its structured training, then additional pre-examination courses will not normally be funded.
- 9.4 The study leave budget year runs from 1st March to 28th/29th February so that it is aligned with financial reporting requirements. The funding will be taken from the budget year in which the 1st day of the study leave falls and not from the year in which it was applied for.
- 9.5 All Postgraduate Doctors in Training must add their Study Leave applications to the Accent Study Leave Manager system **prior** to the course date. Postgraduate Doctors in Training cannot submit a retrospective claim onto the Accent system
The system will not allow expenses to be uploaded without an application for Study Leave already in process / approved within the system.

An estimated expense amount must be added to the Accent application, this is so the Training Programme Director is made aware of the amount of funds being requested.

- 9.6 **All retrospective expense claims will be declined by the Study Leave team if the above guidance has not been followed. If there are significant mitigating circumstances in relation to the retrospective claim, then the Postgraduate Doctor in training would need to follow the Local Study Leave appeals process.**
- 9.7 All Study Leave expense claims must be submitted within the 3-month window of the final course date.

10. Application Process

- 10.1 Study Leave applications must be submitted via the Accent Study Leave system, this process is to be used by all Postgraduate Doctors in Training with the exception of Foundation Postgraduate Doctors in Training. Foundation Postgraduate Doctors in Training, if eligible, should refer to the Foundation webpage to confirm how they apply.
- 10.2 All detail of how to submit an application are available via manuals and tutorials on the Study Leave webpage available using the following link.
<https://www.nwpgmd.nhs.uk/study-leave>
- 10.3 Further guidance for TPDs and specialty study leave administrators is available at appendix C.
- 10.4 If a trainee needs study leave but does not need to claim expenses, and vice versa, an application must still be completed and submitted. Applications do not have to be submitted for leave to attend the specialty's teaching programme.
- 10.5 Postgraduate Doctors in Training should be aware that all study leave applications must be submitted via the Accent system a minimum the day before the commencement of any leave applied for. Ideally sufficient time should be allowed for the TPD to consider any applications and for processing by the speciality study leave administrator.
- 10.6 **Please note that Retrospective applications cannot be processed on the new system and the Study Leave team will need to be contacted for advice.**
- 10.7 **Postgraduate Doctors in Training are advised not to pay money in advance of study leave being approved. Any advance payments made, where approval is not granted, will not be reimbursed.**

11. Expenses

- 11.1 Study Leave expense claims **must** be submitted via the Accent Study Leave system. This process is to be used by all Postgraduate Doctors in Training with the exception of Foundation Postgraduate Doctors in Training
- 11.2 An overview of the expenses that can be claimed is outlined below:
- **Travel:** Up to a maximum of the cost of a standard class return rail fare from the trainee's base hospital to the venue. Travel expenses must be claimed at the cheapest possible rate. Mileage can be claimed provided it does not exceed the

cost of the rail fare. The mileage rate is 30 pence per mile. Air travel will only be funded if it is cheaper than the rail fare or if it is not possible to travel by rail (e.g., Northern Ireland or for approved overseas events).

- **Course/Conference fee:** the email will confirm the amount applied for and approved; proof of payment must be provided.
- **Accommodation:** For overnight accommodation within London, the overnight rate should not exceed £150 per night, again proof of payment and confirmation of number of days and dates are required, this applies to stays outside of London as well.
- For overnight accommodation outside London including overseas should not exceed £120 per night.
- **Subsistence:** Up to a maximum of £20 per day. Itemised receipts are required for payment to be approved.

- 11.3 Postgraduate Doctors in Training must take note of the deadline for return of the expenses claim that is stated in the email. This will generally be 3 months from the 1st day of the course. The February deadline is to comply with financial reporting requirements, and it is particularly important Postgraduate Doctors in Training comply with this requirement, otherwise expense may be recorded against the next years budget.
- 11.4 Expense claims will be paid via salary at the end of each month. The Lead Employer operate a cut-off date around the 7th of each month; any claim processed before the end of the previous month will be paid in the following month's salary. See the website for further detail.
- 11.5 As outlined above, study leave applications must be received prior to the commencement of any period of study leave. Retrospective applications for expenses **will not be paid** and cannot be added to the Accent Study Leave Manager system.
- 11.6 Study leave and funding must be used for the purpose for which it was approved. If there are any changes to the approved leave and/or funding, Postgraduate Doctors in Training must inform NHSE NW immediately. Such changes could include cancellation of courses, changes to dates of courses and changes to fees.

12. Working Time

- 12.1 Postgraduate Doctors in Training are reminded that they need to ensure their rota coordinator is aware they are planning to take study leave as soon as reasonably possible so that rotas can be adjusted to facilitate release, whilst maintaining safe levels of service.
- 12.2 Postgraduate Doctors in Training should be mindful of the potential impact of study leave on their adherence to the European Working Time Regulations. Postgraduate Doctors in Training on the 2016 contract are also reminded that Schedule 9 states that '*Safeguards on hours and rest as set out in Schedule 3 continue to apply during any period of leave*'.

13. Appeals

13.1 Hospital specialty and GP Postgraduate Doctors in Training who wish to appeal against a decision to reject their study leave application should refer to HEE NW's Non ARCP Appeal Process which is accessible here: [Policies & Procedures | Health Education North West \(nwpgmd.nhs.uk\)](https://www.nwpgmd.nhs.uk/policies-procedures/health-education-north-west)

However, the appeal should be directed to the relevant HEE NW study leave email address. Dental and foundation Postgraduate Doctors in Training should check the process on the relevant webpage as outlined in section 2 above.

13.2 The Study Leave Local Appeals process is as follows:

- The Postgraduate Doctor in Training contacts the NHSE Study Leave team to advise they wish to appeal within 14 working days of the original decision.
- The NHSE Study Leave team will ask the Postgraduate Doctor in Training to complete the online form to provide details of the application including any mitigating circumstances which may be relevant for the panel to consider. This is in line with Appendix A of the National Study Leave Appeals Process
- The application information is then sent to the Study Leave appeals panel for consideration.
The panel consists of three members of the Senior Study Leave Team, including the Deputy Postgraduate Dean who is acting on behalf of the Postgraduate Dean. The Panel meets twice a month to review appeals.
- The Postgraduate Doctor in Training will then be notified of the panel's decision via email within 20 working days of their appeal submission in line with National Study Leave appeals guidance.

The local Study Leave Appeal panel's decision is final.

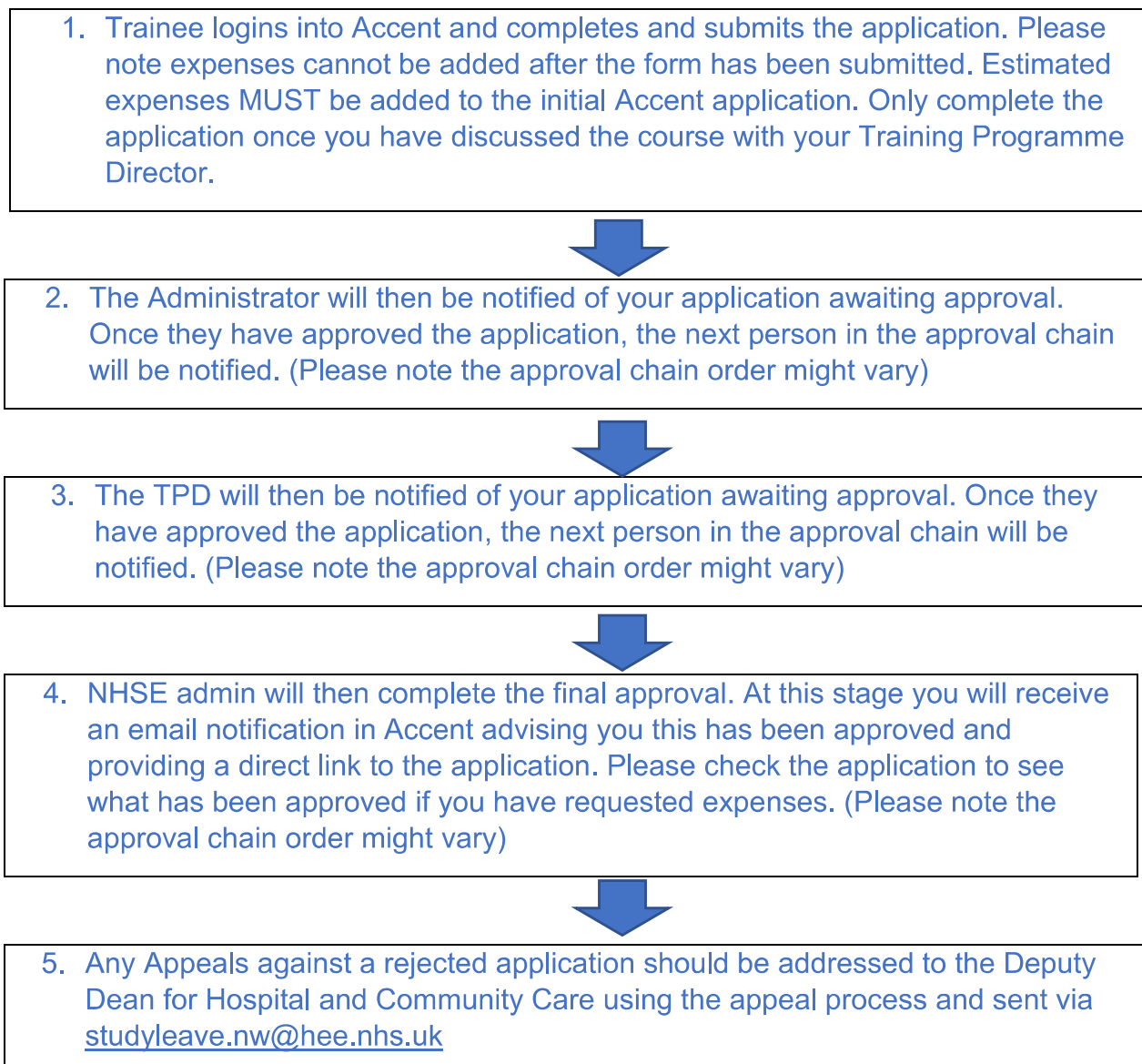
Appendix A: Accent Application Flow Chart

It is essential that you complete your application as soon as you have received Educational Supervisor (ES) and Rota Coordinator approval.

Any application completed less than 42 days before the course start date will require a reason to be considered for expenses.

Any retrospective applications will need to be emailed to the study leave team with all extenuating circumstances explained (studyleave.nw@hee.nhs.uk) to be considered and reviewed, if needed, by the Postgraduate Deputy Dean.

Please note retrospective expenses cannot be claimed for via the Study Leave budget.



Appendix B: Accent Expenses Flow Chart

Please be aware that an estimated expense amount MUST be added to the Accent application at the time of submission,

The confirmed expense amount can then be claimed after the course end date.

The expenses cannot be claimed until the course has ended. Once the course has finished (the end date of your application), you can then complete the expense claim process.

Please be aware that you have **3 months from the course end date** to complete the expenses reimbursement process. If received after this time, expenses will not be reimbursed.

1. You will need to log into Accent and open the application with the expenses that can now be reimbursed. Scroll to the expenses at the bottom and click on each individual expense. Enter the claimed amount and upload the relevant receipt. Please ensure receipts are uploaded and that they confirm payment and do not show the amount due. Ensure that the subsistence receipt is itemised for this to be reimbursed.



2. Once you have entered the claim amounts and receipts, **click on 'claim' (if you click save, it will not submit, you must click 'claim')** the NHSE admin team will receive a notification.



3. Once we have received the notification, we will look at the expense amount that your TPD approved and your receipts and enter the amount in the authorised section with a date next to payment. If any information is missing, we will need to contact you.



4. Once the NHSE admin has entered the payment this would then be reimbursed in the next available pay (this may be a month after the claim due to payroll office processes). Please note ACL Postgraduate Doctors in Training will be reimbursed directly into their banks after an additional form is completed.



5. Any Appeals against rejected expenses should be addressed to the Deputy Dean for Hospital and Community Care using the appeal and sent via studyleave.nw@hee.nhs.uk

Appendix C: Additional advice for TPDs and Specialty Study Leave Administrators

This guidance relates specifically to hospital specialty learning Programmes. It provides an overview applicable to dental Programmes and general practice but TPDs within general practice should ensure they follow any specific guidance provided by the Head of School. There is a separate process for Foundation Postgraduate Doctors in Training and Foundation Programme Directors should consult the guidance available here on the Study Leave page via: <https://www.nwpgmd.nhs.uk/study-leave>

Context

1. Study leave is not an entitlement but an allowance, enabling Postgraduate Doctors in Training to enhance the learning opportunities available to them. It should be set within an overall educational programme. It is expected that Postgraduate Doctors in Training will meet with their educational supervisors to plan study leave within the context of their individual learning plan. TPDs should consider applications that have the approval of the trainee's educational supervisor and rota coordinator, and ensure the educational activity is relevant to the curriculum and will contribute to the trainee's individual learning plan. They will also need to consider each individual application in relation to the needs of other Postgraduate Doctors in Training on the programme, ensuring fairness and equity with other Postgraduate Doctors in Training.
2. With the implementation of managed Programmes of employment and education for specialty training the proposed seamless nature and the movement of Postgraduate Doctors in Training between sites during their programme means that TPDs need to plan study leave allocation in a managed way across the whole of training. This will be best achieved by the trainee having a study leave budget throughout the period of training.

Planning

3. Specialty Postgraduate Doctors in Training should plan their educational programme for each period of training with their educational supervisor at the start of their attachment. A learning plan should be devised taking into account the trainee's previous experience and their career goal.
4. The provision of a learning plan together with a record of study leave taken to date will assist the TPD/Study Leave Administrators when considering the approval of an application for study leave. If a learning plan is not submitted alongside an application for study leave, the TPD/Study Leave Administrator should consider a trainee's experience to date and the level of need (as determined by the college curriculum) when considering applications.
5. TPDs and their Training Committees will work with the Head of School /Associate Dean to identify courses that are 'essential' and 'desirable' for progress within the specialty. Postgraduate Doctors in Training should choose from a portfolio of learning activities, which will be maintained and updated by the training committee.

6. Funding for all elements of the courses identified by an educational supervisor as being 'essential' will depend upon adequate funds being available to the trainee from the budget allocated to the programme.

Eligibility

7. The eligibility for study leave is defined in section 6 of the guidance document.
8. When considering applications from post-CCT Postgraduate Doctors in Training in their period of grace, TPDs must ensure that the application is to enhance the trainee's professional capabilities in preparation for their future role as a consultant. TPDs have discretion to approve applications from post-CCT Postgraduate Doctors in Training for time only. Skills-based clinical courses and overseas events are not generally considered appropriate for post-CCT Postgraduate Doctors in Training.

Overseas Events

9. The guidelines for considering requests for overseas events are outlined in section 7 of the guidance document.

Study Leave Allocation

10. As outlined in section 8 of the guidance document, study leave is generally limited to 30 days per year for full time Postgraduate Doctors in Training and is calculated pro-rata for LTFT Postgraduate Doctors in Training (LTFT). For example, a trainee working LTFT at 60% would have an allowance of 18 days per year.
11. Training programmes can require that a number of days be allocated to the specialty training programme. Generally, not more than 50% of the allowance should be allocated to the specialty training programme. TPDs need to make this clear to Postgraduate Doctors in Training when they commence on the training programme.
12. When calculating study leave all the days approved and carrying a liability for expenses are counted, including weekends and Bank Holidays. Time spent travelling to and from the event is also counted. Postgraduate Doctors in Training are able to claim back zero days, please liaise with the placement Trust to do this if required.
13. Postgraduate Doctors in Training can request up to a maximum of 7 days leave per year for private study (pro-rata for LTFT Postgraduate Doctors in Training)
14. The time will be taken from the leave year in which the 1st day of the study leave falls and not from the year in which it was applied for. TPDs have flexibility to manage their budget in a way that runs across 2 financial reporting years. This is particularly relevant for core training programmes, to ensure core Postgraduate Doctors in Training can access their full allowance of leave and any associated funding.

Study Leave Funding

15. NHSE has agreed, within its total study leave resource, a notional per capita allowance for each specialty trainee including LTFT Postgraduate Doctors in Training. As outlined in section 9, this is based on £767+MFF per trainee per year. The allocation to each programme is based on the number of placements on the programme and the programme does not receive an allocation for any Postgraduate Doctors in Training who are out of programme. TPDs may top-slice the allocation to support educational activities such as the specialty training programme (see 19 - 25 below). Specific one-off educational events may also be arranged and funded (see 26 – 29 below).
16. Postgraduate Doctors in Training working LTFT have pro-rata access to the same total amount of funding for the duration of their training programme as full-time Postgraduate Doctors in Training have for the duration of their training programme. The study leave budget for LTFT Postgraduate Doctors in Training needs to be amended and monitored by TPDs accordingly.
17. As NHSE works with a budget that is cash limited, approval may be given to paid leave for study but without provision of expenses or with a grant towards the cost of the course.
18. The study leave budget year runs from 1st March to 28th/29th February so that it is aligned with financial reporting requirements. The funding will be taken from the budget year in which the 1st day of the study leave falls and not from the year in which it was applied for. TPDs have flexibility to manage their budget in a way that runs across 2 financial reporting years, to take account of the study leave year running from August to August.

Top-slicing for Specialty Teaching Programmes

19. This mechanism enables TPDs to top-slice the notional study leave budget available to Postgraduate Doctors in Training within a programme to enable them to fund the specialty teaching programme and other events that benefit several Postgraduate Doctors in Training.
20. All top-slicing requests must be approved by the Deputy Postgraduate Dean for Hospital and Community Care prior to the study leave funding year commencing on 1st March. There are two windows for claiming Topslicing funding in February and August of each year. **TPDs are advised to contact the study leave team for further guidance before submitting a request for top-slicing and to request a link to the online application form.**
21. An account must be set up at TPD's Trust to house the funds.
22. To access the funds an invoice must be sent to:

NHS ENGLAND
X24 Payables K005
PO BOX 312
LEEDS
LS11 1HP

23. The invoice must be accompanied by a list of the Postgraduate Doctors in Training who are to benefit from the training. This should include Postgraduate Doctors in Training' full name and GMC number or training number.
24. All claims for speakers, invoices for room hire etc. must be directed to the TPD's Trust finance department for payment from the programme's account.
25. TPDs are required to provide NHSE with an annual statement of expenditure for the funding that has been top-sliced and this must be submitted by the end of February each year. A suggested template is attached at the end of this appendix in point 31. However, it is acknowledged that very small or very large programmes may need to submit a report that better reflects their circumstances. Requests for top-slicing of the next year's allocation will not be approved until the annual report for the previous year's expenditure has been submitted.
26. In addition to the top-slicing mechanism outlined above, a TPDs can topslice in order to deliver skills workshop or a specific event, where economies of scale make it more beneficial to organise it for several Postgraduate Doctors in Training on the programme. The TPD should plan for this and apply via the two windows per year. The cost would be divided by the number of Postgraduate Doctors in Training and the corresponding amount deducted from their notional study leave allowance. This process is for one-off events where the TPD has not already set up a top-slicing mechanism or where they have exceeded the amount already top-sliced but have identified a further event that would be beneficial to Postgraduate Doctors in Training on the programme.

Application Process

27. The process is outlined in the Topslicing Quick Guide document and a link to the online Topslicing form can be obtained from the Study Leave Team.
28. TPDs have a key role in considering applications and ensuring the educational activity is relevant to the curriculum and will contribute to the trainee's individual learning plan. They must also consider the application in relation to the needs of other Postgraduate Doctors in Training on the programme, ensuring fairness and equity with other Postgraduate Doctors in Training. If funding is requested, the TPD must also ensure the amount is within the funding envelope allocated to the training programme. If the application is for an overseas event, the TPD will consider the application according to the guidelines outlined in section 7 of the guidance document.

Reporting on the Usage of Top-sliced Funds

29. An example of a summary of accounts for the use of top-sliced funding is included below:

Trust	<i>Name of Trust</i>	
Training Programme	<i>Name of Training Programme</i>	
TPD	<i>Name of TPD</i>	
Funds Allocated		5,000
Date of Event		
Details of Event		
Cost		
01.01.2017	Speaker cost for Prof X at Y venue	250
01.02.2017	Refreshments for training day at Y venue	87
01.03.2017	Speaker cost for Prof A at B venue	260
01.04.2017	Room hire & refreshments for regional training event	1200
01.05.2017	Room hire, materials & refreshments for skills workshop at G venue	550
01.06.2017	Refreshments for training day at Y venue	90
01.07.2017	Refreshments for training day at Y venue	85
01.09.2017	Refreshments for training day at Y venue	87
01.10.2017	Refreshments for training day at Y venue	91
Total Funds Used		2,700
Total Funds Remaining		2,300