

# **RCPCH: A Guide to Less than Full Time Training (LTFT)**

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# 1.0 LTFT: The Basics

## 1.1 Background Information

Previously known as Flexible Training, LTFT training is available to doctors in training who are unable to work full time for “well founded individual reasons” (European Union Council Directive 93/16-/EEC 1993).

Flexible Training refers to doctors within the Specialist Training System who work a reduced number of hours compared with full time trainees. The majority (78%) of LTFT trainees choose to become LTFT due to childcare reasons<sup>\*8</sup> but other reasons for working fewer hours include caring for other dependent family members, health issues (22%) and commitments outside of medicine (for example in national or international sport).

LTFT trainees have the same career progression and assessment strategy as their colleagues but face many logistical differences. This includes more responsibility for organising their hours and working patterns and a sometimes complicated and time consuming process in order to ensure posts are approved for training. Attitudes towards LTFT trainees have been improving but there are still challenges to overcome in the workplace.

### **Purpose of this Guide**

The purpose of this guide is to bring together information on LTFT training from a variety of sources in order to improve understanding and aid both trainees and trainers in making the most appropriate decisions for their circumstances. According to the BMA Survey of Junior Doctors (2008), the main barrier to LTFT training is finding out about the application process; this guide will hopefully address this issue as well as covering other useful topics for prospective and current LTFT trainees and their departments.

### **Advantages of working Less Than Full Time**

The benefits to a trainee include not just being able to work and be paid for doing so, but also to be able to continue to progress in their career despite other commitments. Other advantages include a better work-life balance, less exhaustion and more enthusiasm for work, and increased empathy with patients.<sup>\*5</sup>

Skills in time management, communication, self-awareness and responsibility for managing your own workload are all developed by working LTFT.

## 1.2 Types of Post

Post	Details	Advantages	Disadvantages
<b>Slot – Share</b> (Preferred option)	2 trainees share a single full-time slot on a rota. Each must work at least 50% but they can work different percentages of the full time week.	<ul style="list-style-type: none"> <li>• Gives exposure to out-of-hours and on-call work.</li> <li>• Trainees can split the rota as per their needs.</li> <li>• Flexibility – trainees can choose when to overlap (if working &gt;50%)</li> </ul>	<ul style="list-style-type: none"> <li>• Need to be allocated a slot-share partner who can work the appropriate days of the week.</li> <li>• Needs very good communication between partners to ensure adequate handover of jobs/patients.</li> <li>• May miss activities which occur on the days not worked</li> </ul>
<b>Reduced hours in a full time post</b>	A trainee works a certain percentage of hours. The trust/department has to cover the remaining shifts. Usually the trainee needs to work 70% or more but this method of working may be used for <70% if a slot-share cannot be arranged.	<ul style="list-style-type: none"> <li>• Gives exposure to out-of-hours and on-call work.</li> <li>• Trainee can usually choose the shifts as per their needs.</li> </ul>	<ul style="list-style-type: none"> <li>• May need to do more on-calls/ night shifts than a slot-share to cover the service.</li> <li>• Difficulties with attitudes of colleagues if remaining shifts have to be covered (or if locums cannot be found.)</li> </ul>
<b>Supernumerary</b>	A trainee may be either an “extra” doctor on the rota working alongside a colleague or an additional post on the rota may be created for them. On-calls and night shifts are not included and need to be arranged by separate negotiation with the trust.	<ul style="list-style-type: none"> <li>• Shifts can be arranged to suit the trainee.</li> <li>• Colleagues usually appreciative of extra help.</li> <li>• Majority of work hours are 9-5.</li> </ul>	<ul style="list-style-type: none"> <li>• Can be difficult to arrange out-of-hours banding/ salary with the trust.</li> <li>• Possible reduced exposure to out of hours training experience</li> <li>• Posts not educationally approved without out-of-hours experience and need separate assessment of educational value of the post – more paperwork to complete.</li> <li>• Can be difficult to integrate with the department – not “part of the team.”</li> </ul>

## 1.3 Hours and Salary Calculation

The average hours of a flexible trainee is calculated from their rota once it has been agreed by the department and the pay-scale is as follows:

Scale	Hours worked on average	Payment as fraction of full time basic salary	
F5	Between 20 and 24 hours/week	0.5	50%
F6	Between 24 and 28 hours/week	0.6	60%
F7	Between 28 and 32 hours/week	0.7	70%
F8	Between 32 and 36 hours/week	0.8	80%
F9	Between 36 and 40 hours/week	0.9	90%

Then a banding supplement is applied depending on the intensity and frequency of antisocial hours. The banding is NOT necessarily the same as full time trainees on the same rota as the limits for frequency of weekends / on-calls is set differently for LTFT trainees. (See flow chart for more detail)

Scale	Definition	Additional Payment as fraction of above basic salary	
Band A	Highest intensity and/or most unsocial hours	0.5	50%
Band B	less intensity at less unsocial times	0.4	40%
Band C	all trainees working some hours outside the normal week-day (8am-7pm)	0.2	20%
No band	All hours fall between 8am-7pm on week days only.	0	0

The annual salary increment is time and not training level based. So LTFT trainees still get a yearly increment in their salary even if they do not change ST grade.

### Examples:

**Trainee A:** Slot-Share working 60% on a band 1A rota:

$$\text{Salary} = (\text{Basic full time salary} \times 0.6) + ((\text{Basic full time salary} \times 0.6) \times 0.5)$$

Salary for hours worked (F6) + Supplement for intensity (Band A)

**Trainee B:** Slot-Share working 21 hours a week with occasional on-calls:

$$\text{Salary} = (\text{Basic full time salary} \times 0.5) + ((\text{Basic full time salary} \times 0.5) \times 0.2)$$

Salary for hours worked (F5) + Supplement for intensity (Band C)

### Banding flowchart (flexible trainees)

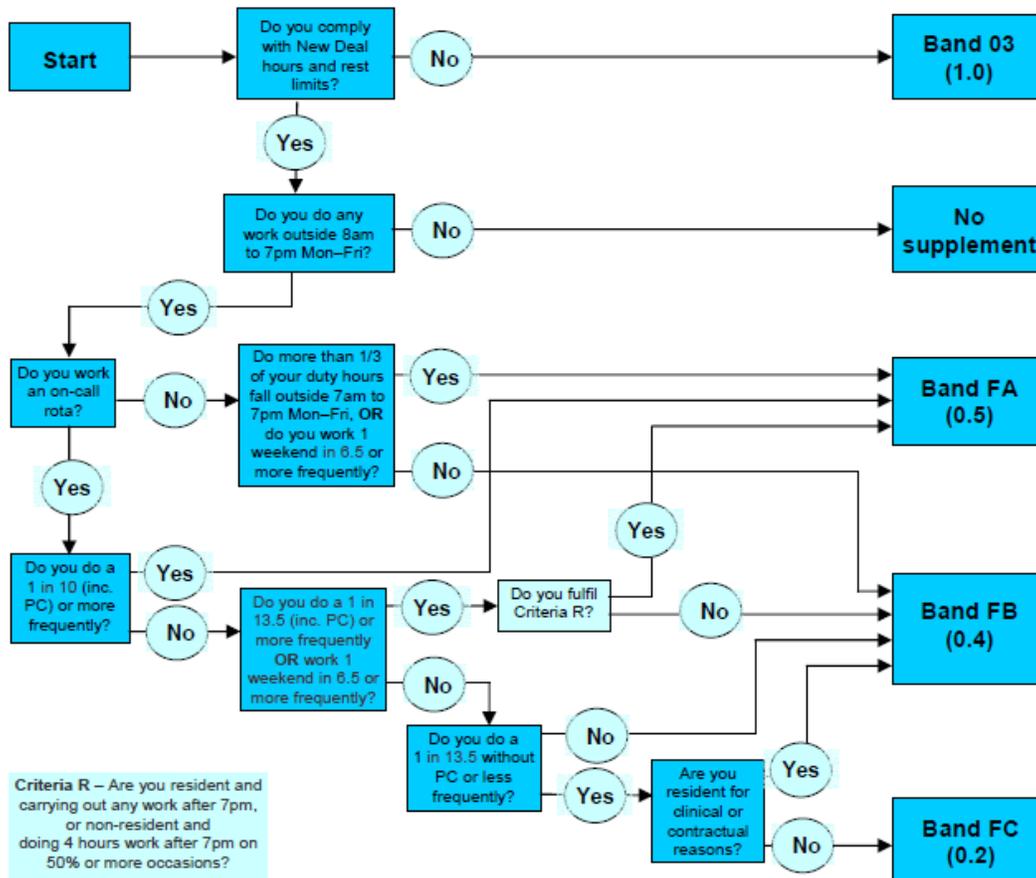


Chart taken from "Equitable Pay for Flexible Medical Training"

## **Who pays my salary?**

Each type of post is funded differently. There is more information for different Deaneries on their respective websites.

**Slot-Shares:** One trainee is funded through the MADEL (Medical & Dental Education Levy) as per normal. The additional funds for the second trainee come from the Deanery Flexible Training budget, but in practice both trainees will receive their salary, banding and out of hours supplements from the trust as they did when they were full time trainees. The overlap in hours between 2 slot-share partners (working over 50%) creates extra “doctor-hours” for the department.

**Reduced hours in a full time post:** Salary is paid for by the trust as for full-time trainees. However the trust may incur extra expense in locum payments for remaining shifts.

**Supernumerary:** posts are usually un-banded and the basic salary is paid for at the mid-point of the salary scale by the deanery. Any extra hours / seniority / banding payments for on-calls must be negotiated separately with the trust and is paid for by them.

Some deaneries refuse funding for Supernumerary posts, affected trainees are therefore encouraged to slot-share, or to do reduced hours in a full time post.

## **1.4 Reduced subscription rates for LTFT trainees**

LTFT trainees may be entitled to reduced subscription rates for organisations such as the RCPCH, BMA, and defence organisations such as the MDU / MPS. This depends on the amount of sessions worked or expected salary and arrangements are variable between organisations – see the RCPCH flexible training website for more details: [http://www.rcpch.ac.uk/sites/default/files/asset\\_library/Training/Less%20Than%20Full%20Time%20Training/Reduced%20Subscriptions%20-%20Feb%202010](http://www.rcpch.ac.uk/sites/default/files/asset_library/Training/Less%20Than%20Full%20Time%20Training/Reduced%20Subscriptions%20-%20Feb%202010).

## 1.5 Current Situation

LTFT Training is one of the Improving Working Lives (IWL) standards (NHS Policy 2002). Subject to demand, NHS Trusts were to be working towards the Department of Health target of a minimum of 20% LTFT trainees by 2010! Clearly this aspiration has not been achieved and there may not be this level of demand

Paediatrics is one of the specialties with the highest proportion of LTFT trainees along with general practice. It is likely that numbers of LTFT trainees will continue to increase.

Each region of the UK should have a designated LTFT advisor on the RCPCH LTFT Advisory committee. They are available for help and support for existing and prospective trainees. If this post is vacant in a region, Training Programme Directors and Regional Advisors may be able to offer help and advice instead.

The LTFT Advisory committee meet twice a year to discuss issues related to LTFT training and maintain a website of useful resources. LTFT issues can be raised at this meeting by contacting the LTFT trainee representative, or via the RCPCH Trainee's Committee itself through the local area representatives.

## 1.6 Eligibility

Eligible applicants are divided into 2 categories. Applications are usually from category 1, but any situation can be assessed and priority given to those trainees most in need of LTFT funding. Different Deaneries have different funding policies (e.g. some will only fund category 1 applicants) so check with the individual deanery websites. Applications can also be fast tracked if necessary if a sudden need for LTFT working occurs.

Category 1	Category 2
<ul style="list-style-type: none"><li>• Disabled or in ill-health (this includes those on in vitro fertility programmes);</li><li>• Caring for an ill/disabled partner, relative or other dependent;</li><li>• Providing care for young children (both male and female applicants)</li></ul>	<ul style="list-style-type: none"><li>• Opportunities for personal development e.g. participation in national sporting events</li><li>• Medicolegal politics, committee involvement or journalism</li><li>• Religious commitments</li><li>• Non-medical and professional development e.g. management courses</li></ul>

*Categories taken from "Principles underpinning the new arrangements for flexible training" NHS Employers document.*

## 1.7 Application Process

### Overview

Usually the application process takes around 3 months. A trainee considering entering LTFT training needs to contact the relevant people at the deanery to obtain and complete the eligibility paperwork. They also need to inform their Training Programme Director (TPD).

Once they have been assessed as “eligible” for LTFT training, further paperwork will be sent from the deanery to gain approval for funding and/or educational approval for the post. When this has been processed by the deanery, the trainee receives written confirmation of approval and can start LTFT.

The trainee needs to decide the preferred number of hours to work.

Where able this is accommodated, between 50-80% is usual, with 60% being typical. Only in exceptional circumstances will <50% be supported, and then only for a short period of time. Please see the GMC position statement on less than full-time training – October 2011 for clarification (see below)

Which days of the week to work will depend on several factors—training needs, slot shares (see below), The Training programme director will usually allocate slot shares. The trainee may need to negotiate the rota (especially with a slot share) and negotiate with the trust for out-of-hours work if the post is supernumerary.

It is important to check with the trust in which you will work before deciding which days of the week to work. When is the regional teaching day? What specific training needs do you have? How best will these be met? You may also need to change the days in which you work at some point (for example when rotating trusts where, or when changing slot-share partners.) It is worth looking for childcare options which can be flexible with advanced notice e.g. it may be possible to change days at a larger nursery with advance notice, or finding a childminder who could change days (and hours) may be very useful in the long run, especially when start times of shifts / duration of travel changes every 6 months.

In some regions where hospitals, trainees, and deaneries overlap, you may need to apply to the deanery in which the hospital is based. For example a Kent, Surrey and Sussex based trainee will need to apply to London Deanery for LTFT approval and funding if their rotation takes them to work in a London based Hospital, even though they are based in the KSS Deanery.

## **Visas**

If you are training in the UK on a tier 2 visa and you have a reduction in your salary (eg if you start training less than full time) a change of employment application must be made to the UK Boarder Agency. This is the responsibility of you and your sponsor.

## **Reassessment**

Each deanery has their own set of forms and policies / procedures to follow. They usually are split into:

1. Eligibility for LTFT
2. Educational Approval for posts
3. Funding Approval for posts

Eligibility is reassessed frequently in some deaneries (e.g. 2 yearly) or only if circumstances change in others, so check with the relevant deanery for timescales.

The educational approval forms usually need re-submitting with each change of post as this includes details of the educational opportunities available on the days worked in that trust. This ensures that trainees do not miss out on certain elements of training.

Funding approval forms vary between deaneries and may have a time duration before they expire - therefore although you can apply for eligibility at any time, if you are returning to work after maternity leave for example, you may need to return the funding documentation within a certain time of your planned return date for it to still be valid.

Once in a LTFT post, it is the trainee's responsibility to inform the deanery of any changes – for example changes of address, working pattern, slot share arrangements or for periods of absence such as maternity or sick-leave.

Once you are in a LTFT post, the relevant deanery's LTFT Office will usually contact you to request updated forms when necessary and individual guidance can be found on the individual Deanery websites.

## **When can I start or finish LTFT training?**

Once approval has been granted, you need to discuss starting as a LTFT trainee with your Training Programme Director. Due to rotation arrangements, there may be a delay before you can actually start LTFT, this may be your preference eg returning after maternity/adoption leave. There may also be a delay in returning to full time training. Where possible, starting or leaving LTFT should coincide with post rotation dates in September and March.

### **What information is needed to complete the forms?**

Deaneries usually request information to confirm your eligibility (e.g. dates of birth of children or medical certificates), as well as generic information regarding your training level and address / contact details.

You may need to arrange to visit the Trust Finance Director or Medical Staffing Department of the hospital in which you are to work in order to get a signature on the funding documentation. This is best done in person (and send the forms to the deanery yourself as forms often get lost if left to medical staffing!)

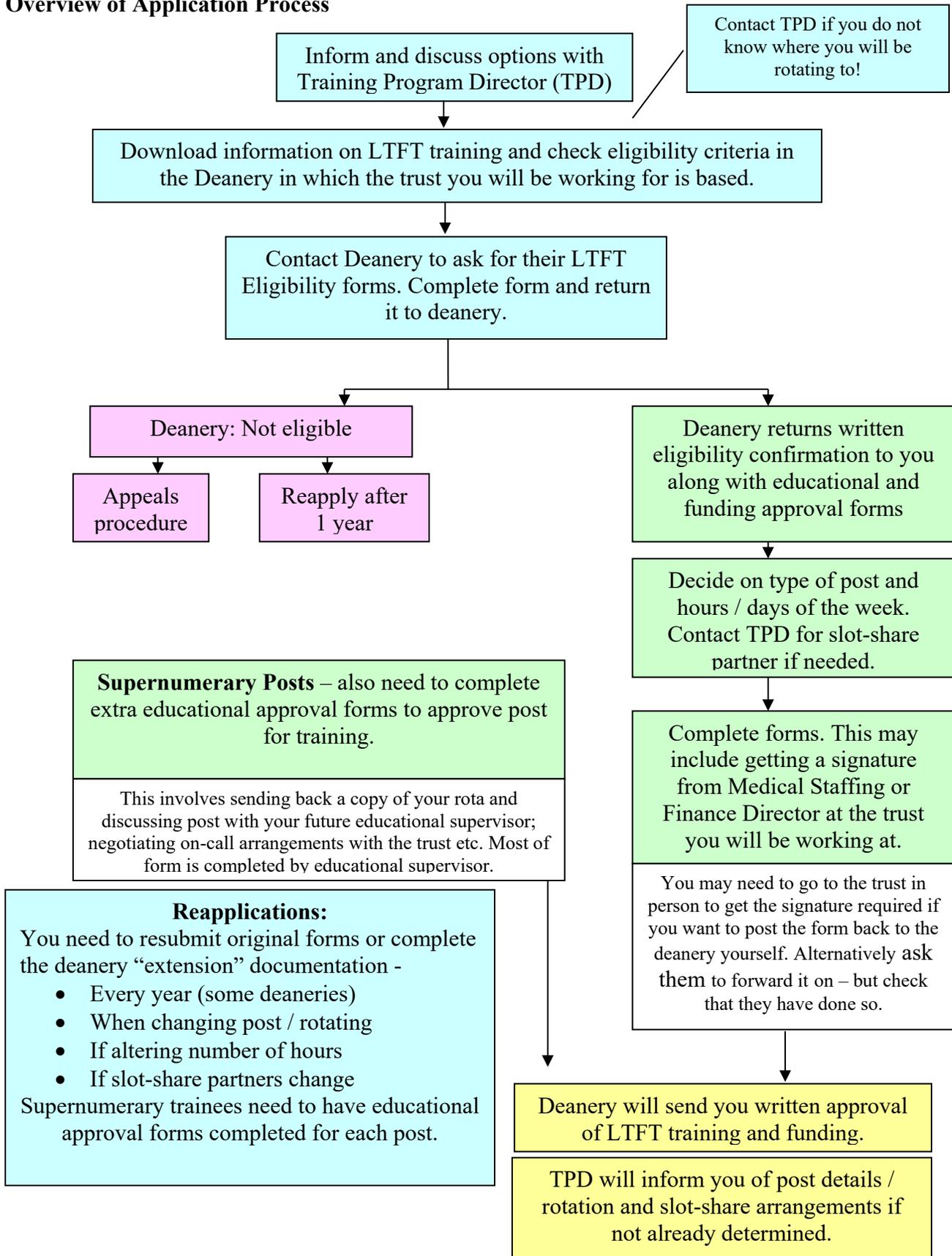
You should meet with your future Educational Supervisor to decide on educational objectives / opportunities. In some deaneries your programme will require prior approval before you start work.

Obtain a rota prior to starting your job.

A supernumerary post will always require educational approval forms.

**Be Organised!**

## Overview of Application Process



## **1.8 Leave arrangements**

### **Annual Leave and bank holidays**

LTFT trainees are entitled to pro-rata annual leave and public holidays. The RCPCH have clarified the position in regard to bank holidays which are more complicated for the LTFT trainees who do not work on Mondays:

*There are eight Bank Holidays per year. A LTFT trainee is entitled pro rata (ie a trainee working at 60%WTE will be entitled to 5 bank holidays). Depending on the regular days of work and when Christmas falls, trainees might / might not be due to work on Bank Holidays (the “advantage” usually falls on people working on Mondays).*

*As LTFT trainees can claim a proportion of Bank Holidays, in return, the LTFT trainee must be available to work some of these Bank Holidays. Trainees for whom Bank holidays do not fall on regular work days are entitled to take days in lieu (effectively extra annual leave) but this must be mutually agreed.*

*Trainees who cannot take lieu days are entitled to extra pay at the end of a job.*

*Some Trusts have the policy of giving part time workers an additional leave allowance in the form of pro rata days. ie 5 extra days leave per year. If the doctor does not work the bank holiday they then have 1 day deducted from the 5 days allowance but then if a doctor works a bank holiday they then still have the day to take from the allowance. \*<sup>9</sup>*

### **Study Leave**

Trainees are entitled to pro-rata study leave. The study leave budget available is deanery dependent. Some deaneries provide pro-rata funding (but it may be negotiable at the discretion of the local Clinical Tutor or Director of Medical Education for occasional years with increased expenses). In other deaneries, LTFT trainees receive the same funding as full time colleagues.

## **1.9 Appeals Procedures**

Documentation detailing the appeals process can be requested from the LTFT advisors at the relevant deanery or may be available on the deanery website.

## 1.10 Useful Contacts

### Who is my Training Programme Director?

Each geographical area has an allocated Training Programme Director (TPD) whose role is to support trainees and College Tutors and to oversee the training provided in their “patch”. Larger deaneries may be split geographically or via ST level. If you are unsure who your TPD is, contact the deanery concerned.

### Who is the LTFT advisor for my region/Deanery?

<http://www.rcpch.ac.uk/Training/Flexible-Training>

### Useful Websites and Deanery List

Organisation	Website
Royal College of Paediatrics and Child Health	<a href="http://www.rcpch.ac.uk/lftft">http://www.rcpch.ac.uk/lftft</a>
BMA	<a href="http://www.bma.org.uk">www.bma.org.uk</a>
NHS Employers	<a href="http://www.nhsemployers.org">www.nhsemployers.org</a>

Deanery	Website URL
London	<a href="http://www.londondeanery.ac.uk/var/flexible-training">www.londondeanery.ac.uk/var/flexible-training</a>
KSS	<a href="http://kssdeanery.org/less-than-full-time-training">http://kssdeanery.org/less-than-full-time-training</a>
East Midlands	<a href="http://www.eastmidlandsdeanery.nhs.uk/page.php?id=799">http://www.eastmidlandsdeanery.nhs.uk/page.php?id=799</a>
East of England	<a href="http://www.eoedeanery.nhs.uk/medical/page.php?area_id=77">http://www.eoedeanery.nhs.uk/medical/page.php?area_id=77</a>
Mersey	<a href="http://www.merseydeanery.nhs.uk/trainees/flexible_training/">http://www.merseydeanery.nhs.uk/trainees/flexible_training/</a>
West Midlands	<a href="http://www.westmidlandsdeanery.nhs.uk/Home/LessThanFullTimeTraining(FlexibleTraining).aspx">http://www.westmidlandsdeanery.nhs.uk/Home/LessThanFullTimeTraining(FlexibleTraining).aspx</a>
North Western	<a href="http://www.nwpgmd.nhs.uk/content/less-full-time-training">http://www.nwpgmd.nhs.uk/content/less-full-time-training</a>
Northern	<a href="http://mypimd.ncl.ac.uk/PIMDDDev/pimd-home/lead-employer-trust/less-than-full-time-training-for-specialty-trainees-with-the-exception-of-gp-trainees">http://mypimd.ncl.ac.uk/PIMDDDev/pimd-home/lead-employer-trust/less-than-full-time-training-for-specialty-trainees-with-the-exception-of-gp-trainees</a> (under LET-Human Resources section of website)
Northern Ireland	<a href="http://www.nimda.gov.uk/hospital-medicine/specialties/specialty-induction/">http://www.nimda.gov.uk/hospital-medicine/specialties/specialty-induction/</a> (a guide to LTFT training)
Oxford	<a href="http://www.oxforddeanery.nhs.uk/less_than_full_time.aspx">http://www.oxforddeanery.nhs.uk/less_than_full_time.aspx</a> (deanery) and <a href="http://www.mychox.net/oxpaeds/less_than_ft.php">http://www.mychox.net/oxpaeds/less_than_ft.php</a> (School of Paediatrics)
Scotland	<a href="http://www.nes.scot.nhs.uk/education-and-training/by-discipline/medicine/help-and-support/flexible-training/flexible-training-general-information-eligibility">http://www.nes.scot.nhs.uk/education-and-training/by-discipline/medicine/help-and-support/flexible-training/flexible-training-general-information-eligibility</a> .

Severn	<a href="http://www.severndeanery.nhs.uk/deanery/careers-support/less-than-full-time-training/">http://www.severndeanery.nhs.uk/deanery/careers-support/less-than-full-time-training/</a>
Peninsular	<a href="http://www.peninsuladeanery.nhs.uk/index.php?option=com_content&amp;view=article&amp;id=38&amp;Itemid=44">http://www.peninsuladeanery.nhs.uk/index.php?option=com_content&amp;view=article&amp;id=38&amp;Itemid=44</a> (within Deanery policies and procedures section)
Wales	<a href="http://www.cardiff.ac.uk/pgmde/careersandrecruitment/ltft/index.html">http://www.cardiff.ac.uk/pgmde/careersandrecruitment/ltft/index.html</a>
Wessex	<a href="http://www.wessexdeanery.nhs.uk/quality_management_policies/policies_and_procedures/less_than_full_time_training.aspx">http://www.wessexdeanery.nhs.uk/quality_management_policies/policies_and_procedures/less_than_full_time_training.aspx</a>
Yorkshire Humber	<a href="http://www.yorksandhumberdeanery.nhs.uk/policies/ltft.aspx">http://www.yorksandhumberdeanery.nhs.uk/policies/ltft.aspx</a>

### Other Information Resources

- So You Want To Be A Medical Mum – Dr. Emma Hill, Oxford University Press, 2008. ISBN: 978-0-19-923758-6
  - Information on pregnancy, maternity leave, returning to work, childcare and LTFT training and employment rights
- Equitable Pay for Flexible Medical Training – NHS employers document, 2005
  - [http://www.nhsemployers.org/SiteCollectionDocuments/doctorstraining\\_equitable\\_pay\\_cd\\_080405.pdf](http://www.nhsemployers.org/SiteCollectionDocuments/doctorstraining_equitable_pay_cd_080405.pdf)
  - Information on pay calculations, banding and funding
- Principles underpinning the new arrangements for flexible training – NHS Employers, 2005
  - [http://www.nhsemployers.org/SiteCollectionDocuments/doctorstraining\\_flexible\\_principles\\_cd\\_080405.pdf](http://www.nhsemployers.org/SiteCollectionDocuments/doctorstraining_flexible_principles_cd_080405.pdf)
  - Information on eligibility categories, and appeals procedures nationally.
- Making Part Time Work – Medical Women’s Federation report, 2008
  - <http://www.medicalwomensfederation.org.uk/files/Part-time%20full%20report%20final.pdf>
  - Research into attitudes and experiences of LTFT trainees, career grade doctors and consultants in all specialities in relation to work-life balance, working environment and challenges, career development and LTFT issues.
- Childcare – RCPCH document
  - <http://www.rcpch.ac.uk/ltft>
  - Information on types of childcare, useful agencies/contacts and things to look for and think about when arranging childcare.

## 2.0 References

1. London Speciality School Paediatrics Trainee Committee, Supporting Trainees Subgroup, minutes of meeting held 10/2/09
2. Minutes of the RCPCH LTFT Training Advisors Meeting held 12/3/2010.
3. Equitable Pay for Flexible Medical Training – NHS employers document, 2005  
*[http://www.nhsemployers.org/SiteCollectionDocuments/doctorstraining\\_equitable\\_pay\\_cd\\_080405.pdf](http://www.nhsemployers.org/SiteCollectionDocuments/doctorstraining_equitable_pay_cd_080405.pdf) or available on the RCPCH website:  
<http://www.rcpch.ac.uk/lftft>*
4. KSS Deanery Less than Full Time Training Policy and Guidance, November 2008
5. Making Part Time Work – Medical Women’s Federation report, 2008  
*<http://www.medicalwomensfederation.org.uk/files/Part-time%20full%20report%20final.pdf> or available on the RCPCH website:  
<http://www.rcpch.ac.uk/lftft>*
6. London Deanery Less Than Full Time Training information on London Deanery Website: *<http://www.londondeanery.ac.uk/var/flexible-training>*
7. Principles underpinning the new arrangements for flexible training – NHS Employers, 2005  
*[http://www.nhsemployers.org/SiteCollectionDocuments/doctorstraining\\_flexible\\_principles\\_cd\\_080405.pdf](http://www.nhsemployers.org/SiteCollectionDocuments/doctorstraining_flexible_principles_cd_080405.pdf) or available on the RCPCH website:  
<http://www.rcpch.ac.uk/lftft>*
8. BMA Survey of Junior Doctors 2008: Flexible Training Opportunities – BMA Junior Doctors Committee, October 2008.  
*[http://www.bma.org.uk/careers/training\\_trainers/flexible\\_training/flex2008.jsp](http://www.bma.org.uk/careers/training_trainers/flexible_training/flex2008.jsp)*
9. RCPCH guidance on leave for LTFT trainees – February 2010  
*<http://www.rcpch.ac.uk/lftft>*
10. RCPCH Position Statement on LTFT Training – March 2010  
*<http://www.rcpch.ac.uk/lftft>*
11. GMC position statement on less than full-time training – October 2011  
*<http://www.rcpch.ac.uk/lftft>*