University Hospitals of Leicester

SENIOR MEDICAL STAFF STUDY LEAVE POLICY AND PROCEDURE

(Home, Overseas, Elective & Special Leave for Career Grades)









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REVIEW DATES AND DETAILS OF CHANGES MADE DURING THE REVIEW

Added the Medical Director as the Executive Leave in Section 4 – 23.09.19

Poicy now states that leave/arrangements must be agreed in writing with the CMG in Section 6.1 - 23.09.19

Detailed the PCF4 form as the form to use to claim expenses (Appendix 2) in Section $11.8-23.09.19\,$

Key Changes to Nopte:

• Update to Section 7 regarding funding entitlement for Part time staff.

KEY WORDS

Study leave, Medical Staff, Entitlements.

1 INTRODUCTION AND OVERVIEW

- 1.1 The University Hospitals of Leicester NHS Trust (UHL) fully supports the principles of Continuing Medical Education and Professional Development for all career grades of medical staff. Leave will not be unreasonably denied for any genuine educational purpose, it is however primarily intended for clinically related courses, meetings etc. that attract Royal College CME points.
- 1.2 UHL actively encourages medical staff to undertake roles in support of the wider NHS.
- 1.3 It is the aim of the Trust that all clinicians should both keep their skills and knowledge of their specialty up to date and realise their own full professional potential. In this way the Trust can give its patients the best possible medical and surgical care.

2 POLICY SCOPE

2.1 This policy outlines the requirements and processes in place for senior medical staff study/professional leave within UHL. Wherever, this policy states consultant it should also be taken to mean Honorary Consultant and all other Non-consultant grades including Locum Consultants where appropriate. Leave entitlements may differ for non-consultant career grades, SAS doctors.

Senior Medical Staff	Consultant, Locum Consultant, Honorary Consultant, Specialty and Speacialist Doctor (SAS)
Professional and Study leave (Schedule 18B Terms and Conditions – Consultants (England) 2003)	Usually but not exclusively or necessarily on a course or programme; • research; • teaching; • examining or taking examinations; • visiting clinics and attending professional conferences; • training. Is any form of leave from employment that is designed to improve clinical development, linked to professional guidelines as laid out by national bodies, e.g. GMC's Duties of a Doctor document.
Elective / Special Leave	Special leave for any circumstances may be granted (with or without pay) at

3 DEFINITIONS AND ABBREVIATIONS

3.1

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	the discretion of the employer.
CME	Continuing Medical Education
CMG	Clinical Management Group
LNC	Local Negotiating Commitee
MRC	Medical Rotal College
PDP	Personal Development Plan
UHL	University Hospitals of Leicester NHS Trust
Part Time	Where an employee is contracted to work fewer than full-time
	hours.
PCF4	Business Mileage and Subsistence / Expenses Claim Form
Tracker2	Electronic Online software for recording and approving Study leave (Medical Staff Only)
Medirota	Electronic Online software for recording and approving Annual leave (Medical Staff Only)
HMRC	HM Revenue and Customs

4 ROLES AND RESPONSIBILITIES

- 4.1 The Medical Director is the Executive lead for this policy. The Clinical Management Group (CMG) Clinical Directors and Management teams are responsible for implementing this policy and ensuring that all staff are aware of this policy and adhere to its requirements.
- 4.2 All employees have a responsibility to attend for work in accordance with their contract of employment and to book any absence in accordance with department procedures and as outlined in this policy.

5. BUDGET

- 5.1 The study leave budget is devolved to the Clinical Management Groups (CMG's), thus combining all study leave monies.
- 5.2 The study leave budget will be used for both UK and overseas leave.
- 5.3 Each NHS and honorary consultant will have access to funds within the study leave budget to support the agreed requirements of CME and professional development.
- 5.4 Each Clinical Management Group (CMG) will have a responsibility to authorise all receipts.

5.5 The approval of study leave expenses is assessed over a rolling 3 year period provided the overall Clinical Management Group (CMG) budget is not exceeded in any one year. The amount of £800 per annum (per person) may therefore be seen to 'roll over', provided there are sufficient funds in the budget for any particular year of application.

6 APPROVAL OF LEAVE

- 6.1 The granting of study leave will be based on the following principles:Appropriateness of the course/event
 - Reasonableness of the cost in relation to educational content
 - Fair utilisation of available finances
 - Relationship to consultant's appraisal and Personal Development Plan (PDP)
- 6.2 In line with the terms and conditions of service, granting of leave is subject to the need to maintain NHS services.
- 6.3 Where leave with pay is granted, the consultant must not undertake any other paid work during the leave period without the employing organisation's prior permission.
- 6.4 A study leave application form and course programme must be submitted, with a full estimate of expenses using the process required by the Trust at the time (currently the "Tracker 2" study leave electronic system), even if expenses are not sought.
- 6.5 The intention to take any leave must be notified to the Clinical Management Group (CMG) leave co-ordinator using the process required by the Trust at the time currently the "Tracker 2" electronic system in addition to requesting approval on the Trusts medical e rostering system, currently Medirota.
- 6.6 The CMG Clinical Director (or designated clinical manager i.e. Head of Service as appropriate) must approve and sign all leave requests.
- 6.7 It is encouraged to give the maximum amount of notice possible when booking leave to enable forward planning of clinical commitments. A minimum of **six** weeks' notice must be given for all classes of leave, where any cancellations are necessary. The notice period is measured from when the application is actually submitted. Leave with a shorter period will not be unreasonably refused where service requirements are met.
- 6.8 It is entirely the responsibility of the leave applicant to ensure that applications are submitted in good time to the appropriate persons for approval.
- 6.9 Clinical Management Group (CMG) administrative staff will be instructed not to cancel any fixed commitment with less than **six** weeks' notice without instructions from the Clinical Director or Designated Representative (e.g. Head of Service).
- 6.10 No leave will be approved unless the required and appropriate cover arrangements have been agreed in writing in advance and are fully documented in the leave application.

- 6.11 Clinical academic staff will apply in the same way, and have the same entitlement, as NHS staff.
- 6.12 Commercial sponsorship and funding from any Charitable Fund must be declared on the study leave application form and on the Trust Register. While this is acceptable such sponsorship must not compromise the delegate's position in any future purchasing decisions.
- 6.13 Medical staff applying for extra professional responsibilities that will necessitate taking regular professional leave, must have the approval of their Clinical Director before making an application for or being appointed to such positions.
- 6.14 Paid leave will not be allowed for activities where the staff member is being reimbursed for their time at a rate equivalent to, or above, their NHS or University salary.
- 6.15 Leave must be applied for in advance. Claims submitted retrospectively will **NOT** be paid.
- 6.16 Final approval, and funding decisions, will be made by the Clinical Director, Head of Service, or Medical Director as appropriate, calling as necessary on specialist advice.
- 6.17 In the event that a consultant believes an application has been unreasonably refused the matter shall be referred to the Medical Director within a period of 10 working days of the date of notification of the original decision. In further considering the matter the Medical Director will provide both parties with the opportunity of presenting their case to him. The Medical Director will inform the Chair of the Local Negotiating Committee of the outcome of any such cases.
- 6.18 All leave will be logged by the Study Leave Administrator in the Directorate of Clinical Education using systems in place in the Trust (currently the "Tracker 2" system).

7 STUDY / PROFESSIONAL LEAVE ENTITLEMENT

- 7.1 The study/professional leave entitlement for substantive appointments will be 30 days per three years on a rolling basis. The annual entitlement can be averaged over 3 years. This entitlement will cover both UK and overseas leave. The way Tracker2 calculates leave is by taking the most recent application and working back 3 years thus including all within that period. It does not reset on anniversary of start date.
- 7.2 Each CMG will have its own study leave budget based on the number of consultants in that CMG and all expenses will be paid via this budget. This amount is to cover UK and overseas leave.
- 7.3 Part time Senior Medical staff will be entitled to maintain their CME via the study leave budget in the same way as Full time staff with the amount of £800 per

annum that may roll over based on rolling 3 years, calculated by Tracker2 as explained in 7.1

- 7.4 Part time staff will be entitled to a pro rata day allowance over a rolling 3 years.
- 7.5 Study leave will include both attending and contributing to meetings, conferences or academic events.

8 ACADEMIC COURSES

- 8.1 In the event of an academic course lasting more than a year approval will be sought on a yearly basis and granted conditionally on appropriate attendance and performance in the previous year.
- 8.2 In the event of non attendance at an event the consultant will bear the cost unless it can be shown that the non attendance was the result of circumstances beyond their control, such as cancelleation/distruption of Travel arrangements due to factors including weather, Industrial action, a request from the Trust or in the interests of the service.

9 ELECTIVE LEAVE

- 9.1 The Trust recognises the occasional need for, and real benefit from, extended periods of leave, normally to gain specific additional expertise in clinical, diagnostic and therapeutic techniques or to establish new services within the Trust.
- 9.2 There will be a limit on the number of staff members able to take such leave each year.
- 9.3 Elective leave is discretionary, not an automatic entitlement. Overall benefit to the Trust must be demonstrated.
- 9.4 While elective leave would generally only be available to any one individual once or twice during their employment with the Trust, each application will be judged on its individual merits.
- 9.5 Clinical academics, and occasionally NHS employees, may also apply for elective leave to further their expertise in research.
- 9.6 Elective leave must be agreed by the Medical Director.
- 9.7 Elective leave details must also be logged by the Study Leave Administrator in the Directorate of Clinical Education.

10 PROFESSIONAL LEAVE

10.1 Professional leave is not an additional allocation of leave but part of the study/ professional leave described in the terms and conditions of service. Additional professional or study leave above the thirty days (including off-duty days falling within the period of leave) in any period of three years will be considered on a case by case basis where clear benefits to UHL or the service of the individual consultant having the additional professional or study leave can be demonstrated. In such cases, approval of the additional professional or study leave will be by the CMG Clinical Director or Medical Director.

10.2 Professional leave will be allowed for activities directly benefiting the NHS or academic medicine. If a senior clinician has an on-going commitment which is being undertaken in supporting professional activity and is already included in their job plan, a professional leave application will not be required.

Examples of professional leave include work undertaken with or on behalf of:-

- Department of Health.
- Care Quality Commission (or other NHS assessment processes)
- Universities or similar academic institutions.
- Royal Colleges.
- General Medical Council/Medical Practitioners Tribunal Service
- Professional Associations (e.g. British Medical Association) (note: this to be read in conjunction with the Time Off for Trade Union Duties and Activities Agreement)
- MRC or other such bodies.
- Full-time Teaching Courses or Conferences directly benefitting the NHS.
- 10.3 Special leave will also be granted for certain non NHS activities: examples would include court attendance (if unpaid), magistrates' duties or Army Reserve duties.
- 10.4 For further information on special leave please refer to the Special Leave Policy.
- 10.5 The Trust may, at its discretion, grant professional or study leave above the period recommended with or without pay and with or without expenses or with some proportion thereof. This is not an entitlement. Such cases require CMG/ Clinical Director approval, taking appropriate advice from the Medical Director, and will be managed by exception. A doctor must ensure that approval is in place before applying for any course/activity/position which will require such exceptional study/professional leave.
- 10.6 While six weeks' notice may not always be possible, activities for which professional leave will be sought must be approved through the CMG Clinical Director and/or the Medical Directors' team before they are accepted by a Trust staff member.
- 10.7 The Trust would normally expect that the Royal Colleges and other bodies for whom work was undertaken, would cover any expenses incurred. However, time away from the UHL should be applied for in the normal way so it can be captured on the Tracker database.
- 10.8 Other aspects of leave are dealt with in the Trust's You Matter Policy and also the Senior Medical Staff Annual Leave Policy.

11 PAYING EXPENSES

- 11.1 The attendee should ensure that leave is approved before making any payment.
- 11.2 Fees will be paid by the attendee in advance and refunded by the Trust.

- 11.3 The norm shall be that standard class or economy class fares will be reimbursed. The method of travel chosen should reflect the particular circumstances (e.g. air travel may reduce the period of absence from work or eliminate hotel costs etc). Where a consultant travels using their own vehicle the prevailing HMRC mileage rate will apply in calculating the sum to be reimbursed.
- 11.4 Where a consultant believes there are special circumstances that warrant the incurring of the additional expense of first class or business class travel, those circumstances should be detailed for the consideration of the Clinical Management Group (CMG) Clinical Director. The Clinical Director may, in the interests of maintaining a consistent approach, seek the guidance of the Medical Director. It will always be an option for the consultant to travel first or business class and to personally meet the cost beyond that of the standard or economy fare.
- 11.5 Commercial sponsorship must be declared on the study leave application form. While this is acceptable such sponsorship must not compromise the delegate's position in any future purchasing decisions.
- 11.6 Subsistence will be paid at £15 per day to cover lunch. Overnight subsistence will be paid at £75, to cover dinner, bed & breakfast. Overnight subsistence in London will be £100.
- 11.7 Recognising the importance of networking with colleagues one official course dinner may be paid for, if it appears on the course timetable, to a maximum of £35.00. No other social events will be funded.
- 11.8 Claims for the reimbursement of expenses must be made on the PCF4 form (Appendix 2). No expenses will be paid without receipts, in accordance with Audit requirements.

12 PAYING EXPENSES (ELECTIVE LEAVE)

- 12.1 Elective Leave expenses may be considered for
 - Salary
 - Standard Class/Economy travel
 - Reasonable living expenses
- 12.2 Funding from any other sources must be declared.
- 12.3 A grant may be paid to cover initial expenses, all reimbursement will be subject to the production of receipts.
- 12.4 Any consultant found to be making unreasonale claims may have expense claims denied.

13 EQUALITY IMPACT ASSESSMENT

- 13.1 The Trust recognises the diversity of the local community it serves. Our aim therefore is to provide a safe environment free from discrimination, harassment and victimisation and treat all individuals fairly with dignity and respect and, as far as is reasonably possible according to their needs.
- 13.2 As part of its development, an equality analysis on this policy has been undertaken and its impact on equality have been reviewed and no detriment was identified.
- 13.3 Equality, Diversity and Inclusion Statement

We are fully committed to being an inclusive employer and oppose all forms of unlawful or unfair discrimination, bullying, harassment and victimisation.

It is our legal and moral duty to provide equity in employment and service delivery to all and to prevent and act upon any forms of discrimination to all people of protected characteristic: Age, Disability (physical, mental and long-term health conditions), Sex, Gender reassignment, Marriage and Civil Partnership, Sexual orientation, Pregnancy and Maternity, Race (including nationality, ethnicity and colour), Religion or Belief, and beyond.

We are also committed to the principles in respect of social deprivation and health inequalities.

Our aim is to create an environment where all staff are able to contribute, develop and progress based on their ability, competence and performance. We recognise that some staff may require specific initiatives and/or assistance to progress and develop within the organisation.

We are also committed to delivering services that ensure our patients are cared for comfortable and as far as possible meet their individual needs.

14 PROCESS FOR MONITORING AND COMPLIANCE

- 14.1 Managers are responsible for the review of absence levels in their area and ensuring the appropriate processes are followed.
- 14.2 Where monitoring has identified deficiencies, there must be evidence that recommendations and action plans have been developed and changes implemented accordingly. Managers must be able to provide detailed documentation of the recommendations and action plans as requested.
- 14.3 Study/Professional Leave is monitored through the Clinical Education Directorate and reported by exception as required.

Element to be monitored	Lead	ΤοοΙ	Freqency	Reporting arrangements Who or what committee will the completed report go to.
Seniormedical and dental staff study leave is managed effectively.	Study Leave administrator	Tracke2 System	On- Going	CMG/Management / Clinical Directors
The Policy and procedure is followed and applied appropriately	Medical Director	Reviews of Application in Practice	On- Going	CMG Clinical Directors

15 EVIDENCE BASE AND RELATED POLICIES

15.1 This section contains the details of documents you may wish to refer to when managing Senior Medical Staff Study/ Professional Leave.

Senior Medical Staff Annual Leave policy – Available on UHL Connect UHL You Matter Policy – <u>https://uhltrnhsuk.sharepoint.com/teams/pagl/pagdocuments/You%20Matter%20Collea</u> <u>gue%20Support%20UHL%20Policy.pdf</u>

UHL Job Planning guidance – <u>https://uhlconnect.uhl-tr.nhs.uk/site/cc6c1aaf-687f-410f-</u> <u>9fba-1d04b1a53f08/page/c9ce8094-ce1b-4e7d-bb2d-0bff4a6e3e99</u>

Consultant Contract - https://www.nhsemployers.org/articles/consultant-contract-2003

SAS Doctor Contract –https://www.nhsemployers.org/publications/terms-and-conditions-service-specialty-doctors-england-2021

16 PROCESS FOR VERSION CONTROL, DOCUMENT ARCHIVING AND REVIEW

- 16.1 This policy will be reviewed at a minimum of every 3 years and additionally in line with changes to relevant legislation/Terms and Conditions of service.
- 16.2 This document will be uploaded and available for access by Staff through UHL Connect and the Trust's externally-accessible Freedom of Information publication scheme, it will be archived through the Trusts PAGL system.

GUIDELINES ON GRANTING STUDY / PROFESSIONAL LEAVE

- 1. UHL Consultants are allowed 30 days study / professional leave in a 3 year rolling programme.
- 2. Off-duty days, including Bank Holidays, which fall during the period of study leave, will be counted as part of the study leave entitlement. Non working days and weekends do not count as part of study leave entitlement.

3 Consultants must use the electronic booking system currently in use by the Trust (Tracker 2 at present and also Medirota) and leave must be approved by their Head of Service.

- 4. Heads of Service should have applications approved by the by CMG Clinical Director.
- 5. CMG Clinical Directors should have applications approved and by one of the Medical Director's team.
- 6. Approval of leave requires 6 weeks' notice. Applications should be submitted at least 28 days prior to the event with a course/conference **programme** using the Trust's electronic system.
- 7. Retrospective applications will be rejected. Annual leave will be taken.
- 8. Expenses (with all receipts) must be submitted within 3 months of event. Late claims will not be met.

Allowances are as follows:

- Car travelling allowance 30p per mile
- Rail Travel usually 2nd Class see policy
- (Please use advanced ticket purchase deals wherever possible)
- 24 hour overnight subsistence (including all meals) to a maximum of £75.00
- 24 hour overnight subsistence (including all meals) London rate to a maximum of £100.00
- Day only subsistence rate to a maximum of £15.00
- Expense forms must not include alcoholic drinks
- 9. Non consultant career grades applying for study leave will follow the above guidelines.
- 10. Completed, counter-signed expense forms should be sent to the Study Leave Administrator in the Clinical Education Centre at Glenfield Hospital.

Appendix 2

Business Mileage and Subsistence / Expenses Claim Form

Payroll Reference Details								ſ	Regula	r User							
VPD	Assig	nment l	No.	Title	tle Surname Ini						Standard User						
358-UHL											Excess	Miles					(Paid at
Home Address:										End dat	e for Ex	cess N	/liles			PTR)	
										-	Details			Car	Peda		Motor
										Vehicle (tick Box)			Cai	Bike		cycle	
))					
Official E	Base, De	partmer	nt and Dii	rectorate	e:					_	Make +	Mode	I				
		1									Engine size(cc)						
Claim Pe	eriod	From:				To:					Reg.Nu	ımber					
Cost Cer	ntre										Home t	o Base	e (retu	rn Milea	age)		
(a)	(b))		(c	;)			(d)	(e))	(f)	(g)	(h)	(i)	(j)	(k)	(m)
													cable		(ə	rence	
Date	Start poin Home or	t (e.g. Base)	Details of Names of	all places Passeng	s Vis Jers i	ited and in brackets	Journ Point	ey End	Duty		ő	axable	Jon Tax		(taxabl	g Confe	l Out
		·		-			(e.g. He Base)	ome or	s Miles		ger Mile	Miles 1	Miles N) Base	o Work	Traininę TR)	ncy Cal
									Business Miles Duty		Passenger Miles	Excess Miles Taxable	Excess Miles Non Taxable	Home to Base	Return to Work (taxable) On Call	Course/Training Conference Miles (PTR)	Emergency Call Out (taxable)
									ш		<u> </u>		ш		шO	02	
I							SU	B TOTAL									

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USE A SEPARATE FORM FOR EACH VEHICLE

Subsistence and other expenses e.g. car park fees, telephone expenses etc.

Date	Type of Expense	Amount	1. Receipts must accompany all bus/ train/ taxi fares/ accommodation costs.
			2. Subsistence allowance claims must meet the Trust's Financial Instructions and/or appropriate national/local terms and conditions.
			FOR COMPLETION BY MEDICAL STAFFING ONLY COST CODE: TOTAL AMOUNT PAYABLE APPROVED STUDY LEAVE
Total Other Expenses claimed			COMMITTEE DATE

Employee Declaration

I declare that:-

- a) The mileage, expenses and allowances claimed are accurate and were incurred on the duty stated and are in accordance with the Trust's Financial Instructions and/or appropriate national/local terms and conditions
- b) These expenses have not or will not be claimed against another organisation.
- c) Where mileage allowances have been claimed I hold a full UK driving licence
- d) The insurance policy in respect of my motor vehicle (registration number overleaf) provides cover, whilst on official business, for third party insurance including damage to property, and that the policy is now in force and covers the journeys claimed.
- e) My vehicle is currently being maintained in a roadworthy condition. For vehicles 3 years or above a valid MOT certificate is held.
- f) (If claiming subsistence) I necessarily had to spend more on meals than I would have at my base and (if claim is for more than ten hours absence) I had to incur expenditure on a second meal and (if claim is for over 12 hours absence) I left home before breakfast could have reasonably been taken.

Employees

signature.....Date.....

Emergency Call-out Employee's statement (THIS MUST BE COMPLETED WHERE EMERGENCY CALL-OUT MILES CLAIMED)

I certify that advice on the handling of the emergency was given before starting my emergency call-out journeys identified overleaf and I accept full responsibility for those aspects appropriate to my duties from that time.

Where this was not the case but call-out miles have been claimed, these are shown under column (e)

Employee's

signature.....Date.....

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PLEASE NOTE IF VEHICLE CHANGES PLEASE COMPLETE AND SUBMIT REVISED VEHICLE APPLICATION FORM AND SEND TO HUMAN RESOURCES

Note. HOME TO BASE EXPENSES FOR MEDICAL STAFF

Mileage is not payable for your normal daily commute to work except on the days that you subsequently use your vehicle for an official journey. On those days only, in addition to the mileage for the actual journey, you may claim mileage between your home and base up to a maximum of 10 miles in each direction. Please note however, that you can only claim mileage actually incurred in your home to base commute. For example, if your home to base distance is 6 miles each way, the maximum you may claim is 6 miles each way. If however the distance is 13 miles each way, the maximum you can claim is 10 miles each way.

Manager's Certification

I certify that to the best of my knowledge and belief, the claimant was engaged on the duty stated on the dates shown overleaf and above and that claims for expenses and subsistence are in accordance with the Trust's Financial instructions and procedures.

Managers signature	.Date
Managers Name (Block Capitals) Number	Telephone
Managers E-mail Address	

ONLY ORIGINAL FORMS WILL BE ACCEPTED AND ALL AMENDMENTS WILL NEED TINITIALLED. DO NOT USE CORRECTION FLUID. NO FAXES WILL BE ACCEPTED