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| **Name of Document** | | | **Out of Programme (OOP) Guidance** | |
| **Category** | | | Standard Operating Procedure (SOP)  **This SOP is applicable to all doctors in training within NHS England.** | |
| **Purpose** | | | This document is one of a suite of Standard Operating Procedures to support the management of trainees across England. This SOP is aligned to the principles of ‘A Reference Guide for Postgraduate Foundation and Specialty Training in the UK’ (The Gold Guide) and ‘A Reference Guide for Postgraduate Dental Core and Specialty Training’ (The Dental Gold Guide). Please refer to the most recent versions. Currently, there is a separate SOP for Dentists in Training.  Since 2020, Foundation Training is embedded within the Gold Guide. Therefore, the NHS England suite of SOPs applies to all doctors in training, including Foundation, unless specified otherwise. Please note that Foundation-specific differences are highlighted in purple font in the Gold Guide.  Within the SOP, whenever reference is made to the Postgraduate Dean, it refers to the NHS England English Dean/Postgraduate Dean or their nominated representative who will be responsible for managing the process on their behalf.  Throughout the document, unless otherwise stated, the term ‘trainee’ refers to postgraduate doctors in training and also applies to public health trainees with a medical or non-medical qualification.    This SOP is intended to be a guide to encourage consistency of practice across England. Due to the complex nature of training, there will be occasions where Postgraduate Deans will apply their discretion in enacting this SOP to take account of individual circumstances and varying local structures (e.g. Lead Employer).  Local offices should ensure they review the associated PAG documents.    English Deans are committed to equality, diversity and inclusion (EDI), with a duty to eliminate discrimination, promote equality and ensure inclusive opportunities are available to all with regards to age, disability, gender, ethnicity, sexual orientation, religion or belief in the design and delivery of all our services. English Deans aim to meet and exceed their statutory obligations under the Equality Act 2010 by adopting a continuous improvement approach.  This suite of SOPs will be routinely screened against relevant Equality and Diversity documentation. | |
| **Authorised by** | | | Health Education England Deans (HEEDs), now English Deans | |
| **Date Authorised** | | | 27/06/2017 | |
| **Implementation Date (current version)** | | | 02/08/2023 | |
| **Next Review Date** | | | SOP to be reviewed in line with any future Gold Guide revisions, or every 12 months, whichever comes first | |
| **Document Author** | | | English Deans and Senior Managers Group (formerly HEED & HEED Senior Managers Group) | |
| **Version** | **Date** | **Author** | | **Notes**  Reason for Change, what has changed, etc |
| 1 | 27/06/2017 | HEED | | Document signed off at HEED |
| 2 | 22/06/2018 | HEED | | Document signed off at HEED |
| 3 | 17/09/2019 | HEED | | Document signed off at HEED |
| 4 | 28/04/2021 | HEED | | Document signed off at HEED |
| 5 | 11/10/2022 | HEED | | Document signed off at HEED |
| 6 | 19/07/2023 | HEED | | Document signed off at PGMDE Operational Oversight Group |

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| Related Documents   * *Gold Guide 9th Edition: A Reference Guide for Postgraduate Foundation and Specialty Training in the UK:* [https://www.copmed.org.uk/gold-guide/gold-guide-9th-edition](https://protect-eu.mimecast.com/s/RvNQCwKv9ig579NSViV9S?domain=copmed.org.uk) * *Appendix 4, Gold Guide 9th edition:*   [https://www.copmed.org.uk/gold-guide/gold-guide-9th-edition](https://protect-eu.mimecast.com/s/RvNQCwKv9ig579NSViV9S?domain=copmed.org.uk) and download GG9 Appendix 4 – Out of Programme Form   * *GMC Approved Training Sites:* <http://www.gmc-uk.org/education/28373.asp> * *OOP guidance for trainees – when do I need approval?* <https://www.gmc-uk.org/education/standards-guidance-and-curricula/guidance/out-of-programme/out-of-programme-guidance-for-doctors-in-training/when-do-i-need-approval> * *OOP Pause guidance:* [*https://www.hee.nhs.uk/our-work/doctors-training/flexibility-medical-training-pathway*](https://www.hee.nhs.uk/our-work/doctors-training/flexibility-medical-training-pathway) * *OOP sponsorship guidance* [*https://medical.hee.nhs.uk/medical-training-recruitment/medical-specialty-training/overseas-applicants/overseas-sponsorship-guidance/out-of-programme-oop-and-your-sponsorship*](https://medical.hee.nhs.uk/medical-training-recruitment/medical-specialty-training/overseas-applicants/overseas-sponsorship-guidance/out-of-programme-oop-and-your-sponsorship) |

# 1. Background

There are a number of circumstances when a trainee may seek to spend some time out of the training programme to which they have been appointed. All such requests need to be agreed by the Postgraduate Dean or nominated deputy in advance, so trainees are advised to discuss their proposals as early as possible. Requests for out of programme (OOP) relate either to obtaining clinical training (OOPT), clinical experience (OOPE), or research (OOPR) in a different setting or a career break (OOPC) – see Gold Guide version 9: 3.143-3.176. In addition, for England only there is Out of Programme Pause (OOPP).

For trainees who are on a sponsored visa by NHS England (Skilled Worker or Tier 2), consideration on the impact of their visa should be made before approving an OOP. Please see section ‘6. Sponsorship considerations’

# 2. General Principles

1. Trainees wishing to take time out of programme must have the written agreement of the Postgraduate Dean. Requests should be made by downloading the relevant guidance and application form from the local NHS England office website.
2. It is expected that trainees notify their Postgraduate Dean and their Training Programme Director (TPD) of any possible time out of programme, at least six months in advance of the proposed start date, so that the needs of patients are addressed appropriately. This will also ensure that we are able to meet the code of practice requirements.
3. Commencement of OOP will not normally be agreed until a trainee has been in a training programme for a least one year.
4. OOPs for Foundation doctors are likely to be on an exceptional basis given the length and nature of their training, and would usually be for 12 months, between the end of F1 and the beginning of F2.
5. Occasions where OOP is granted to trainees in core training programmes are likely to be exceptional given the length and nature of their training.
6. OOPs may also be considered in the final year of training if the trainee is on track for an ARCP outcome 6.
7. A trainee with insufficient progress at the ARCP or with unmet objectives identified at their ARCP will not normally be granted a period of OOP.
8. Trainees will retain their National Training Number (NTN) for the duration of the OOP, unless the Certificate of Completion of Training (CCT) date falls within this time. If a trainee is in their final year of training and they do not have all of the required competencies for the award of an outcome 6, they will retain their NTN if their OOP does not count towards training.
9. Approval from the appropriate Royal College/Faculty may be required and trainees should check and comply accordingly. The College/Faculty will indicate the length of time the OOPT/R should count towards CCT, where relevant. The trainee’s CCT date will be reassessed on return to the programme in the light of educational progress and the time left in programme.
10. The General Medical Council (GMC) is the only body that can educationally approve OOPT/R to count towards the award of a CCT. NHS England is required to submit an application for prospective GMC approval for any OOP that is to count towards a CCT or CESR(CP)/CEGPR(CP) on behalf of the trainee and this application is required to include support from the relevant College/Faculty. If prospective approval for OOP is not sought from the GMC, then it cannot count towards a CCT or CESR(CP)/CEGPR(CP). Applications must be submitted to the GMC in advance of the OOPT/R as they will not approve applications retrospectively. This could include applications for overseas placements which doctors wish to count towards training. Where the OOPT or OOPR is in a GMC approved programme in the same specialty, an application for further GMC approval is not required. Where the OOPT is not in an approved practice setting they need to provide appropriate support for their prospective approval.
11. Trainees must ensure that NHS England has an up-to-date contact address and e-mail address throughout the period of OOP.
12. A trainee taking an OOP will end an academic award. If a trainee wishes to continue ACF/ACL then they will need to apply to NIHR.
13. Trainees who are working on a Tier 2 or Skilled Worker Visa must ensure that they have referred to the OOP Sponsorship Guidance. The guidance is set out by the NHS England national overseas sponsorship team and impacts sponsorship arrangements based on OOP types, including sponsorship cancellations, alternative visa arrangements, cooling off periods and reapplication requirements. Please refer to Section 6 Sponsorship Considerations.

# 3. Types of Application

The purpose of taking OOP is to support the trainee in:

* 1. undertaking clinical training that is not a part of the trainee’s training programme (OOPT)
  2. gaining professional skills that would enhance their future practice (OOPE) – This could include enhancing skills in medical leadership, academia, medical education or patient safety, or enhancing clinical skills related to but not part of the curriculum. Such experience may benefit the trainee (e.g. working in a different health environment/ country) or may help support the health needs of other countries (e.g. with Médecins Sans Frontières, Voluntary Service Overseas, global health partnerships). OOPE is not applicable in foundation training.
  3. undertaking a period of research (e.g. leading to an MD or PhD degree) (OOPR)
  4. taking a planned career break (OOPC)
  5. to step out of formal training for up to 12 months to undertake an NHS or other patient facing UK based non-training post. This flexibility initiative can be a vital tool to support trainee wellbeing. (OOPP)
  6. undertaking sub-specialty training outside of their NHS England local office (OOPT). The trainee will need to be placed in the sub-specialty post on TIS within the training Deanery and OOPT selected in placement type. Where the sub-specialty training is undertaken within the NHS England local office an OOP application is not required

# 4. Application Process

* 1. Trainees must complete the application form available on the NHS England local office website and submit the application to their local NHS England office.

1. Trainees must complete the application form in full and provide all supporting documentation (details of the opportunity and any formal communication with the host, advert, timescales, offer and background information) required as part of the process. Trainees should discuss the OOP with their Educational Supervisor and their TPD prior to application of OOP.
2. The TPD will review the application on the basis of the appropriateness for the trainees and for the programme, and the Postgraduate Dean (or nominated Deputy) will make the final decision to approve, reject or request further information. GMC processes will be followed where appropriate.
3. Trainees will be notified in writing of the outcome of their application.
4. Trainees may appeal the decision in writing to the Postgraduate Dean. The Postgraduate Dean’s decision is final.
5. Some Colleges have additional requirements as part of the OOP process. Trainees should contact their relevant College to ascertain requirements.

# 5. Employment/Contractual Issues

1. Trainees whose OOP applications are successful will normally be granted unpaid leave for the period of the OOP.
2. Trainees should ensure that the organisation/authority offering the OOP post issues a statement of terms and conditions of service.
3. It is the responsibility of the trainee to contact their current employer to establish how the OOP will affect their:
   1. Continuous employment
   2. Incremental progression
   3. Parental leave entitlement
   4. Employer’s contributions to superannuation
   5. Any other employment issues
4. Trainees taking career breaks should get advice from their employers on all statutory rights in relation to career breaks.
5. Historically, it has been the case that trainees on OOP are not normally eligible to apply for Study Leave. It may be appropriate for trainees to access Supported Return To Training (‘SuppoRTT’) funding/opportunities in preparation for returning from OOP. Currently, the NHS England 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. The trainee’s base local office will be responsible for approving requests and any resulting funding. The individual’s employer is responsible for re-imbursing costs who may or may not be associated with the base or the host local office. Liaison between relevant local offices should therefore take place to ensure smooth administration. Where an individual chooses to take study leave while OOP, that individual would then not be eligible to apply for, and have funded, that same element again upon re-joining their training programme.
6. Trainees on OOP are not normally eligible to receive expenses from NHS England.

# 6. Sponsorship Considerations

1. NHS England can continue to sponsor during an OOPT and specific OOPE, for all other OOPs NHS England would need to withdraw sponsorship for the duration of the OOP.
2. For full details on the types of OOP and sponsorship implication contact the National Overseas Sponsorship team on [sponsorship@hee.nhs.uk](mailto:sponsorship@hee.nhs.uk)
3. When returning to training, NHS England will be able to provide trainees with a Certificate of Sponsorship (without the requirement for recruitment) so that they can apply for a further sponsored Skilled Worker visa..
4. When an OOP has been approved, trainees must complete the Reporting Form and submit to the National Overseas Sponsorship team to confirm the dates of the OOP

# 7. Changes to Approved OOP Applications

1. Trainees wishing to extend or curtail periods of OOP must have the approval of the Postgraduate Dean and should discuss changes with supervisors and the Training Programme Director in the first instance, and at the earliest opportunity.
2. Trainees must make a formal application to extend/curtail normally at least six months in advance of their initially approved end date. The trainee should submit details outlining the reason(s) for the extension/curtailment and have the support of their clinical/research supervisor and TPD. Information about this process is detailed on NHS England local office websites.
3. Trainees wishing to extend OOP (T or R) should consult College/Faculty guidance in terms of the time that can count towards CCT.
4. Requests should be submitted to the relevant NHS England local office, following the process outlined on the website. The trainee will be notified in writing of the outcome of the decision.
5. Early curtailment of an OOP may lead to an alternative placement than previously agreed upon return.

# 8. OOP and Revalidation

1. Whilst on any OOP, the Postgraduate Dean remains the Responsible Officer, and therefore must remain connected on GMC Connect.
2. Trainees should ensure that, whilst on OOP, they continue to meet all requirements of the revalidation process as per the Revalidation SOP. This should be confirmed prior to the OOP if any information is required by the local NHS England Revalidation Team.
3. Those on OOP must retain their license to practise with the GMC

# 9. ARCP Processes for OOP

1. Trainees on OOP will still be required to engage with the annual ARCP process.
2. The ARCP panel should receive documentation from the trainee on the required form (Appendix 4 of the Gold Guide) indicating what they are doing during their OOP time, if the OOP is not recognised for training.
3. **OOPE –** If the OOP period is to gain clinical experience that will not contribute towards the competences required by the training programme (OOPE), then an annual OOP update form with their form R and Educational Supervisors report should be submitted, including an indicative intended date of return.
4. **OOPR –** If the purpose of the OOP is research, the trainee must produce a research supervisor’s report together with the annual OOP update form, with their form R, and Educational Supervisors report indicating that appropriate progress in research is being made, along with achievement of the relevant degree (if appropriate). If there is prospective approval by the GMC for the OOPR to contribute to the CCT or CESR(CP)/ CEGPR(CP), then formal assessment documentation must be submitted annually to the review panel.
5. **OOPC –** If a trainee is undertaking a career break, a yearly OOPC request should be sent to the panel, indicating that the trainee is still on a career break and including an indicative intended date of return. OOPC is normally a maximum of one year (the Postgraduate Dean has discretion to consider a second year of OOPC in exceptional circumstances, an extension beyond two years would not normally be approved).
6. **OOPT –** If the trainee is out of programme on a training placement or OOPR that has been prospectively approved by the GMC and that will contribute to the competences of the trainee’s programme, then an Outcome 8 should not be used. The trainee must submit an OOP update form, with their From R and Educational Supervisors report for a routine assessment of progression should be made and an appropriate ARCP Outcome awarded.
7. **OOPP –** If following OOPP, the trainee and their Educational Supervisor do not want to count competences and did not feel an adjustment to the CCT date would be appropriate then there would be no requirement to do so. At the ARCP, a formal determination of outcome would be made with an adjustment to the CCT in light of demonstration of competencies evidenced following return to training and the Educational Supervisor’s report; this would be in accordance with Gold Guide and GMC guidance.

# 10. Return from OOP

1. Return to programme should be planned, both before and during the period of OOP. At least six months’ notice should be given if return to programme is earlier than initially planned, with no guarantee that a training post will be available, although every effort will be made to identify a programme placement at the earliest opportunity.
2. Any Skilled Worker visa implications should be understood by the trainee, please refer to section 6
3. In the interest of patient safety, an assessment should be made by the School to agree an appropriate return to clinical training. The School will need to consider the type of OOP, length of time out of training, maintenance of clinical skills throughout the OOP, etc. Liaison with SuppoRTT team as necessary to be considered.
4. All trainees returning from an OOP should have a return to practice programme organised for them which may include a phased return to clinical practice. It may also be appropriate for SuppoRTT to be accessed. This will be accelerated as practically as possible but may result in a delay in recommencement of training.
5. On return from OOP, an Educational Supervisor review should occur early on for the above reasons and to ensure that any support required to return to the training programme is put into place.