Supporting NCHD access to Protected Training Time – 11th July 14

1. Importance of access to protected training time

Health service management, the Irish Medical Organisation (IMO) and the Forum of Postgraduate Training Bodies are agreed on the need to ensure NCHD access to protected time for education and training activities as appropriate to their participation in a specialist training or professional competence scheme.

2. NCHD Contract 2010

For the purposes of clarity, it is noted that NCHD Contract 2010 (at Section 9 k)) provides leave to allow NCHDs to participate in educational / training activities for up to a maximum of 18 days per 6-monthy period.

In addition, the Contract (at Section 8 c), provides that the NCHD may, subject to the agreement of the Employer, make an explicit structured and scheduled commitment to educational activities in line with educational and training requirements. The Contract notes that this commitment will include paid non-clinical training days (or part of as appropriate) as required by the relevant programme of specialist training / competence assurance. A footnote to this section of the Contract indicates that such paid non-clinical training days include those for Senior and Specialist Registrars and a range of trainees in Psychiatry and General Practice.

The relevant extracts from NCHD Contract 2010 are attached at Appendix I. It is noted that the protected training time described at Section 6 of this document is additional to existing contractual entitlements unless otherwise specified.

3. Different categories of training time

Taking account of the provisions of the NCHD Contract detailed above, four separate categories of training time can be identified:

- a) scheduled and protected time off-site attending training or undertaking study as required by a training or professional competence scheme;
- b) on site regular weekly/fortnightly scheduled educational and training activities including conferences, grand rounds, morbidity and mortality conferences;
- c) For those specialties which require repeated exposure to and practice of specific clinical procedures time to allow trainees to observe and subject to Consultant approval, participation under supervision in certain planned procedures.
- d) research including that taking place during paid non-clinical training days;

It is noted that the extent to which NCHDs engage in engage in each category of training time may vary depending on specialty, sub-specialty and whether they are participating in a specialist training scheme or professional competence scheme. In general terms, NCHDs participate in a) and d) above while on educational leave or as part of paid non-clinical training days.

4. Rostering arrangements for each category of training time

The rostering arrangements associated with the four categories of time described are as follows:

- a) Scheduled and protected time off-site attending training as required by a training or professional competence scheme – is rostered within the NCHD's standard working week but does not count as working time;
- b) On site regular weekly/fortnightly scheduled educational and training activities including conferences, grand rounds, morbidity and mortality conferences can be readily rostered taking account of the NCHD's work pattern that week. If appropriately protected as set out below such time does not count as working time.
- c) Where a procedure is scheduled and proceeds as planned, rostered observation and potentially participation in procedures appropriate to the NCHD's specialist training / professional competence may be facilitated. If appropriately protected as set out below such time does not count as working time.
- d) Research, study etc is not rostered and may take within or outside working time.

Taking the above into account, the term on-site refers to the public hospital / agency campus and locations operated by the NCHD's employer for the purposes of providing public health services. The term off-site refers to any location which is not on-site e.g. the offices of a postgraduate training body.

5. Principles governing rostering and payment of training time

It is agreed that:

- ordinarily, a Consultant will be involved in training delivery;
- NCHDs will participate in training within the normal scope of the working day rather than outside it:
- the key objective is as working hours reduce to EWTD limits to ensure that the NCHD is provided with a defined cohort of protected time to support participation in and progression through training and maintain professional competence;
- category a) and b) and (c) of training time must be protected for rostering purposes;
- an NCHD who has completed a 24 hour shift may not participate in training activities under Category c) above until they have received appropriate rest as required by the EWTD.
- rostered time spent engaged in the activities described under categories a), b) c) or d) will be paid as per the pay rates relating to normal and overtime hours as provided for in NCHD Contract 2010;
- rostered time engaged in training / educational activities will not be counted as working time for EWTD purposes if:
 - the NCHD is off call, is not carrying a bleep or a mobile phone for the purposes of being contacted for work purposes and cannot be required to return to duty under normal circumstances prior to the end of the defined period;
 - the time is recorded as spent participating in training / educational activities;
 - o In relation to category c) above, the NCHD must have elected to attend the training opportunity and cannot be required by the employer to do so. The NCHD must be able to leave the procedure if necessary and may choose to do so and there must be sufficient staff to perform the procedure to completion without the NCHD being required. This will ensure that NCHDs in such specialties are able to gain exposure to appropriate procedures from a training rather than service perspective.

- It is noted that this document does not require or impose a mandatory 24 hour shift length in any setting or specialty nor preclude the introduction of a 13 hour shift. It is instead focused on the protection and remuneration of training time.
- Payment arrangements for unrostered overtime remain as per national guidance and NCHD Contract 2010 – which require that NCHDs are paid for any unrostered overtime claimed by the NCHD and approved by the relevant Consultant subject to resolution of any queries raised by management regarding overtime claims.

6. Allocation of protected training time

Taking the above into account, it is proposed that NCHDs receive rostered protected training time under categories b) and c) above as follows:

	Interns	Specialist trainees	NCHDs on Professional Competence Schemes
Category b) educational / training activities On site regular weekly/fortnightly scheduled educational and training activities including conferences, grand rounds, morbidity and mortality conferences	On average, up to 13 hours per month	On average, up to 17 hours a month	On average, up to 6 hours 30 minutes a month
Category c) educational / training activities Time to allow trainees to observe and subject to Consultant approval, participation under supervision in certain planned clinical procedures	On average, up to 7 hours 30 minutes a month. This may be exceeded if hours are available within annual limits.	On average, up to 10 hours 30 minutes per month. These figures may be exceeded if hours are available within annual limits.	On average, up to 3 hours 45 minutes per month. This may be exceeded if hours are available within annual limits.
Annual Limit Includes all hours rostered under Categories b) and c) above, paid non- clinical training days and special interest days.	Up to 246 hours per annum	Up to 328 hours per annum. In the case of Higher Specialist Trainees in Psychiatry, up to 492 hours. This includes hours rostered under Category d) as set out at Section 4 above.	Up to 123 hours per annum

Note: Employers and trainers must make every effort to ensure NCHDs receive commensurate access to protected training time appropriate to their participation in training, specialty and grade. In the case of specialist trainees in Psychiatry, their entitlement incorporates existing paid non-clinical training days and the hours totals are therefore larger. General Practice Trainees' existing off-site training allocations are well known and established. This document recognises and in no way alters the existing off-site protected training arrangements delivered under the auspices of the Irish College of General Practitioners.

7. Sanction for and recording of protected training time

NCHD participation in protected training time must be sanctioned and recorded in a manner which meets the requirements of the both the relevant training body as regards training and the employer as regards rostering to meet service need and accurate calculation of working time for EWTD purposes.

Taking this into account, it is noted that the HSE (including Medical Manpower Managers) and Forum of Postgraduate Training Bodies will jointly agree a form (to be included at Appendix I when finalised) for use in each hospital / agency to record NCHD participation in and document appropriate sanction for the following:

- a) Scheduled and protected time off-site attending training as required by a training or professional competence scheme – is rostered within the NCHD's standard working week but does not count as working time;
- b) On site regular weekly/fortnightly scheduled educational and training activities including conferences, grand rounds, morbidity and mortality conferences – can be readily rostered taking account of the NCHD's work pattern that week. If appropriately protected – as set out below – such time does not count as working time.
- c) Where a procedure is scheduled and proceeds as planned, rostered observation and potentially participation in procedures appropriate to the NCHD's specialist training / professional competence may be facilitated. If appropriately protected as set out below such time does not count as working time.

It is anticipated that existing approval and rostering processes address a) above already. In that context, the focus will be on readily identifying and recording NCHD participation in b) and c) within rostered time and the sanctioning and recording arrangements associated with same.

8. Implementation

The arrangements set out above will take effect from Monday 14^{th} July 2014 – the date of the forthcoming NCHD rotation.

9. Verification

The arrangements set out in this document will be subject to a joint verification process including the HSE, Forum of Postgraduate Bodies and IMO within 6 months of July 2014 and annually thereafter. Changes will be introducted in line with the NCHD rotation on the 2nd Monday in July each year as necessary. Verification will include evaluation of the nature and training value of activities conducted during protected training time, the extent of NCHD participation and the measures in place to ensure that working time is not recorded as protected training time.

Appendix I – Extracts from NCHD Contract 2010 regarding leave for training purposes

NCHD Contract 2010 (at Section 9 k)) provides leave to allow NCHDs to participate in educational / training activities as follows:

- i) "up to a maximum of 18 working days (based on a 7.8 hour working day) per 6-month period to facilitate:
 - (1) Attendance at courses, conferences, and educational events determined to be appropriate by the HSE, the recognised postgraduate training bodies and the Universities;
 - (2) Study leave prior to an examination or repeat examination for higher degrees or diplomas determined to be appropriate by the HSE, the recognised postgraduate training bodies and the Universities;
 - (3) Attendance at examinations determined to be appropriate by the HSE, the recognised postgraduate training bodies and the Universities;
 - (4) Attendance at interviews within the Irish public health service appropriate to the NCHD's training / career pathway;"

The Contract requires that:

- ii) "All educational leave must:
 - (1) be relevant,
 - (2) take account of service and rota needs.
 - (3) be recommended by the supervising Consultant / Clinical Director and
 - (4) be approved by the Employer in advance in line with the Employer's leave policy and with cognisance of the requirements of any specialist training / professional competence scheme the NCHD is participating in and related medical education and training requirements."

In addition, the Contract (at Section 8 c), provides that the NCHD may, subject to the agreement of the Employer, make an explicit structured and scheduled commitment to educational activities in line with educational and training requirements. The Contract notes that this commitment will include paid non-clinical training days (or part of as appropriate) as required by the relevant programme of specialist training / competence assurance.

A footnote to this section of the Contract indicates that such paid non-clinical training days include those for:

"Senior Registrars and Specialist Registrars – each of whom are entitled to the equivalent of one day per week with full pay for individual and specific research projects. It also applies to a range of trainees in Psychiatry and General Practice."

The Contract notes that such structured and scheduled commitment and responsibility and accountability for same will be agreed in advance by the Employer with the relevant Training Body or University, will be consistent with the agreed training principles for postgraduate medical education and training 1 and shall be incorporated into rosters.

¹ 'Training Principles to be incorporated into new working arrangements for doctors in training', published by the Medical Education and Training Group, July 2004.

Appendix II - Recording NCHD participation in protected training time and appropriate sanction for same

In relation to Category b) educational / training activities as described in the document entitled 'Supporting NCHD access to Protected allocated for same. My participation amounted to the average hours allocated for such activities appropriate to my grade and training conferences, grand rounds, morbidity and mortality conferences during the claim period. Protected (e.g off-call / off bleep) time was Training Time – 11th July 2014' I can confirm that I participated in on site scheduled educational and training activities including status. It is noted that NCHD participation in the above activities and the extent to which the employer has provided for and is supporting same will be subject to verification by the Forum of Postgraduate Training Bodies, HSE and IMO.

Allocation of Category C Protected Training Time - Record

This form should be used to record protected training time allocated to Category c) activities described at Section 6 above.

Please note that an NCHD who has completed a 24 hour shift may not participate in training activities under Category c) above until they have received appropriate rest as required by the EWTD. The NCHD must have elected to attend the training opportunity and cannot be required by the employer to do so. The NCHD must be able to leave the procedure if necessary – and may choose to do so and there must be sufficient staff to perform the procedure to completion without the NCHD being required. This will ensure that NCHDs in such specialties are able to gain exposure to appropriate procedures from a training rather than service perspective.

NCHD	Name	Medical Council Registration number	ncil ımber	Grade	Specialty	Supervising Consultant	nsultant
details:		þ					
Date when protected	Category c) educa	Category c) educational / training activities	ctivities		Annual limit /	•	
raining Time provided	Time to allow trainees to observe participation under supervision in		iect to Consi Ianned clinic	and subject to Consultant approval, certain planned clinical procedures	ilmit in this contract period	Approved by	ба
State date	State what activity took place this heading and duration	took place under uration	State wha under this e.g.	State what activity took place under this heading and duration e.g.	State how many hours remain in NCHD's allocation in this contract period	Signed by Trainer / Clinical Director	Signed by Hospital / Agency Management