

# NHS England (NHSE) Study Leave

## An overview of the England-wide approach

### Background

Study budgets were considered nationally as part of the group for Enhancing Junior Doctors' Working Lives which initially arose to address issues raised by postgraduate doctors in training as part of contract negotiations in England, and which sat outside of the contract itself.

Through this forum, variable access to study budgets was highlighted as an issue and, from the working group proposals, regions and local offices were tasked with implementing a process (consistent with national agreement) to support postgraduate doctors in training to access the education support required to meet their curriculum objectives.

From April 2018, Health Education England (since merged with NHSE effective 1 April 2023) announced a new approach for an agreed amount of funding for study budgets to be held and managed by local offices. This budget was to provide support for all postgraduate doctors in training irrespective of post type (i.e. tariff or Local Education Provider (LEP)/other funded).

The purpose of this document is to provide a clear, high-level overview of the study leave process and finance management across England.

This document is also a refresh of national information released at the start of the 2018/19 financial year with the launch of the new approach to study budgets, consolidates previous communications and brings the approach up to date.

Throughout the document, unless otherwise stated, the term 'trainee' refers to postgraduate doctors in training and also applies to postgraduate dentists in training and public health trainees with a medical or non-medical qualification.

### Entitlement

Study leave allowances are described in the NHS doctors and dentists in training Terms and Conditions (2016)<sup>1</sup>.

Grade	Days per annum
Foundation Doctor Year 1	15 days
All other trainees	30 days

As described in the Terms and Conditions, study leave up to these limits "will normally be granted flexibly and tailored to individual needs, in accordance with the requirements of the curriculum. Requests for study leave in excess of these limits should be considered fairly when circumstances indicate such requests to be reasonable and may be granted provided the needs of service delivery can be safely met." (p.61).

<sup>1</sup> [https://www.nhsemployers.org/sites/default/files/media/NHS-doctors-and-dentists-in-training-eng-tcs-v9\\_0.pdf](https://www.nhsemployers.org/sites/default/files/media/NHS-doctors-and-dentists-in-training-eng-tcs-v9_0.pdf)

## Study Budgets

Reforms to study budgets brought a departure from the previously established approach of a notional individual annual allocation of funding. There is no 'cap' imposed to any individual; each study leave episode applied for is considered for approval on its own merit, following the principles outlined in this document applied to the individual circumstances of the trainee.

However, it is important to emphasise that the overall study leave budget is finite and local offices have a responsibility to manage the expenditure and financial balance. This may mean that some activities not required to achieve curriculum outcomes (termed 'discretionary study leave'), may not be approved and/or part-funding may be required by the trainee reflecting both NHSE and the individual's commitment to their enrichment.

## Finance Principles

The Department of Health and Social Care (DHSC) annual Education and Training Tariff publication includes details for study budgets.

The annual total study leave budget is derived through a 'top slice' of each tariff funded post as follows:

£812 (currently) plus local Market Forces Factor (MFF) x number trainees in tariff funded posts

The overall 'pot' is then proportionally distributed to each local office based on the number of trainees. Funding is managed in each local office by the Postgraduate Dean's team to support all trainees, including those occupying LEP/other funded non-tariff training posts.

Each local office has appropriate systems in place (in collaboration with LEPs and/or employers) to ensure study leave application processes are managed effectively and fairly and that expenditure is approved where necessary and monitored. This includes a local process to capture accurate data on approved applications so that appropriate reimbursement can be made. Local offices will continue to ensure an effective process for the timely reimbursement of funds. Although working to the same England-wide principles outlined in this document, the arrangements in each part of England will vary to ensure the most effective fit to the local models (e.g., a Lead Employer model). Re-imbursement for committed study budget funds to an LEP will be conducted via established Education Contract process.

To ensure consistency, have a robust and accurate monitoring process of expenditure and forecast a year end position, NHSE Finance in liaison with local offices will provide quarterly returns (monthly in Quarter 4) for Postgraduate Deans, Senior Business Managers Group and the National Study Leave Working Group.

It is recognised that local offices will use a reasonable and proportionate amount of the pooled resource for administrative support. A 1.5% top slice for local administration costs associated with managing study leave is the established England-wide position.

## Trainees in and out of Scope

The study leave budget (derived from the tariff ‘top-slice’) is intended to cover study leave expenditure of trainees working in *both* tariff funded posts and non-tariff funded posts (e.g., LEP funded). For avoidance of doubt, this excludes the study budget for postgraduate dentists in training, public health trainees, and palliative care doctors as well as General Practice doctors in training working in primary care settings. Study budgets for these trainees are drawn up locally and managed as per existing processes. They are referenced in this document as the same principles are applied. An overarching summary position is planned so the total financial commitment to study leave is visible annually.

Less than full time (LTFT) and academic trainees have equitable access to study leave funding.

Defence trainees in Foundation and Specialty Training Programmes must apply to their Local Education Provider (e.g., Trust) for study leave time but applications for study leave funding are submitted to the Defence Deanery. Only courses that are required for a defence trainee’s job role (e.g., ALS) should be funded by the LEP.

It is important to emphasise that, although the funding does not derive from the same sources, the high-level principles outlined in this document should be followed for all postgraduate doctors, dentists and public health trainees within England. Appendix A details specific principles for all General Practice doctors in training (both when in hospital and primary care settings). Appendix B outlines principles specifically for postgraduate dentists in training.

Postgraduate Deans are responsible for ensuring the same principles are followed and they are aware of all local budgets used to fund study leave and that these budget lines are used appropriately.

## Overnight allowance

These limits apply for all trainees:

Allowance	Cost
Overnight allowance (commercial – e.g. B&B/Hotel)	For overnight accommodation within London, the overnight rate should usually not exceed £150 per night.  For overnight accommodation outside of London, the overnight rate should usually not exceed £120 per night.

This is the maximum rate and costs will usually be less. Individuals should use the most cost-efficient way of attending study leave.

## Principles for Approving Educational Activities

The launch of the new study budgets approach in April 2018 established a system whereby NHSE supports:

- Study leave enabling trainees to achieve their curriculum outcomes
- Consideration of discretionary study leave; career enhancing activity that adds value to the individual and/or supports the wider system

Requests for study leave shall be viewed positively, but with regard to ensuring that the needs of service delivery can be safely met. This should not usually present a problem providing agreed notice is given to the LEP/employer and requests do not clash with the leave of multiple colleagues.

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

The COVID-19 pandemic demonstrated that it was possible for some educational activity (e.g., teaching, courses and conferences) to be effectively delivered remotely via on-line platforms. Going forward, it may continue to be possible and/or preferable for certain activities to be delivered remotely and trainees can apply for study leave for such educational activities which will be given due consideration.

Funding and time for statutory and mandatory training is an LEP/employer responsibility and does not come from the study budget.

Trainees continue to apply for study leave through existing locally determined mechanisms. Placement providers retain the decision as to whether individuals may be released for study leave. It remains a requirement for individuals to get their study leave request approved by their Educational Supervisor or equivalent and additional approvers (e.g., Training Programme Director (TPD) or Head of School) dependent on local requirements.

Local offices, working with key faculty such as Heads of Schools and TPDs, will monitor and evaluate the range of funded educational activity undertaken to ensure that it is fit for purpose and is providing quality and value for money. Where programmes provide the necessary training (e.g., via regional study days) this should be prioritised over external study leave.

The Educational Supervisor (or equivalent approver) plays a critical role as they determine, through discussion, the appropriateness of applications. It is an individualised approach, linked to curriculum requirements and the Personal Development Plan (PDP) of the individual:

- The support required to achieve curriculum outcomes should be discussed and agreed by the individual and supervisor.
- The activity should meet the educational needs of the individual.
- It should be clear how educational activity will support achievement of curriculum outcomes and how the activity will help the individual to improve the care they are able to provide to patients or related activities.

## **Study Leave within OOP (Out of Programme)**

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 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.

## **Study Leave within Period of Grace**

Individuals within a Period of Grace are not eligible for funding from the 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.

## **Study Leave and Statutory Leave**

As described in clause 43 of the NHS doctors and dentists in training Terms and Conditions (2016): "Where a doctor takes parental leave their entitlement to study leave continues and this may be taken during 'keeping in touch' days or will otherwise accrue to be taken at a later date". The accrual of study leave will depend on the requirements of the curriculum for the individual's stage of training and to ensure the needs of service delivery can safely be met.

Study leave would not usually be permitted during periods of sick leave. It may be appropriate for trainees to access 'SuppoRTT' funding/opportunities in preparation for returning from prolonged periods away from training.

## **Study Leave during times of national emergencies/pandemics**

When national emergencies cause widespread disruption to training, there will be specific efforts across the system to support catch up focussing on mandated curriculum requirements with appropriate funding made available.

## Position on Courses

There are a variety of courses and conferences available, and an increasing number of practices or approaches open for a trainee to complete their training whether these are essential, as part of the curriculum, or enhancing patient care and/or personal development.

Individuals should prioritise any educational requirements and personal development when requesting study leave. It is expected that individuals will use discretion, in accordance with their obligation to demonstrate professional integrity, when applying for a course or conference, after having a discussion with, and gained agreement from, the appropriate local faculty who are responsible for approving study leave.

Local offices may have provided a course list to assist trainees in identifying the most appropriate courses/conferences to attend. NHSE will not prohibit attendance at an educational opportunity, conference, or other curriculum or professional development opportunity which is not on an 'approved list', however, each local office has a process to follow and should be adhered to. Lists may be used to give automatic approval to speed up administrative processes. A course being absent from the list does not imply immediate rejection. The decision will remain as within the processes and principles already described in this document.

The UK-wide Medical and Dental Recruitment and Selection (MDRS) has ensured that named courses will not be required on job specifications.<sup>2</sup>

Study leave funding should not be used for 'joining'/membership costs for a conference or course, even if this is advertised to provide a reduced attendance fee.

## Royal Colleges

- The 2020 curriculum revision process provided an opportunity to review how curriculum outcomes are delivered and what out of placement activities should be supported to achieve those outcomes.
- Royal Colleges, Specialty Advisory Committees and Faculties should describe expected capabilities and outcomes but not mandate generic or specific courses. It is essential that courses are quality assured.
- High quality locally delivered activity is preferred where possible.
- Royal Colleges, Specialty Advisory Committees and Faculties may recommend a range of educational activities or courses that could be grouped around specific themes aligned to the curriculum that will help postgraduate schools maximise the resource.
- Royal Colleges and LEPs may play a role in delivering courses aligned to the curriculum.

## Principles that constitute quality training activity

- Principles should be applied across programmes with the understanding that some specialties may require a greater proportion of the budget than others and that some curriculum stages may require a greater proportion of the budget than others.
- Delivery of curricula objectives based on individual requirements is the primary consideration.
- A good educational activity or course is aligned to the curriculum, receives positive feedback from trainees and faculty and offers value for money.

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<sup>2</sup> <https://specialtytraining.hee.nhs.uk/Portals/1/MDRS%20RG%20course%20statement%20.pdf>

- Schools and Training Programmes should develop local or virtual training courses where possible to reduce the need for individuals to travel and to release resources to invest in other activities.
- Data on activity should be mapped against curricula to ensure that funds are utilised correctly. This will be essential to deliver quality educational activity that meets individual and local needs.
- Management and leadership skills development will be supported and may be managed accordingly by the local offices or the education team.
- Periods of private study may be supported if considered helpful.

## **Study Leave and Exams**

Exam fees are not funded through study leave. Travel and subsistence can usually be claimed from the study leave budget for sitting exams required within an individual's current curriculum.

Exam preparation courses may be provided locally as part of the general training programme. Such courses should be accessed ahead of private courses as they offer broad support and value for money. Where locally delivered courses are not available, one private preparation course per exam would usually be funded. Additional courses or activities (such as access to digital material) would be considered for funding in exceptional circumstances.

## **Study Leave and Interview Courses**

Interview practice (including for consultant interviews) is usually provided locally within training programmes as part of career guidance, funded from study leave budgets. Where appropriate in-house courses are available, funding for private interview courses will not be approved, although there is Dean's discretion for exceptional circumstances.

## **Advanced Life Support (ALS) Courses**

It is recognised that no specific course is required to achieve curriculum capabilities. The required capabilities can be effectively learned through a 'life support' course covering the required areas in sufficient depth.

The Resuscitation Council UK's Advanced Life Support (ALS) is such a course that delivers these capabilities and has evidence to support an improvement in patient outcomes.

NHSE therefore supports the use of study leave funding to attend ALS courses; where the training programme believes it to be the most effective and efficient way of delivering the capabilities. Trainees are encouraged to undertake the blended delivery 'e-ALS' for first time candidates and recertification for future attendance.

Course fees will usually be reimbursed up to £300, this is the upper limit of what is considered to be a reasonable cost to run an e-ALS course. However, Deans' discretion should be used in individual cases where due to uncontrollable factors the cost is higher, or a two-day course is required. In no circumstances should the trainee be expected to make up any shortfall.

In cases where the employer requires certification, but the capabilities have been achieved via other routes or are not required by the curriculum then it is expected that the employer will cover the cost.

## **Professional and Generic Skills and Capabilities**

Given the General Medical Council (GMC) requires all curricula to meet the standards set out in Promoting Excellence<sup>3</sup> and contain the General Professional Capabilities (GPCs)<sup>4</sup>, this is now considered a core aspect of training.

Therefore, although each application should be considered on its own merit for that individual, study leave applications mapped to GPCs should usually be positively viewed as relevant to meeting a postgraduate doctor in training's curriculum requirements.

## **Foundation Programme Training**

Study leave will normally be granted flexibly and tailored to individual needs, in accordance with the requirements of the Foundation Programme curriculum and the FP doctor's PDP.

Study leave for Foundation Year 1 doctors (maximum 15 days) will take the form of regular scheduled teaching/training sessions as agreed locally. Additionally, F1s can bring forward up to 5 days of Foundation Programme study leave from F2 for tasters to inform future career decision making.

Study leave for Foundation Year 2 doctors (maximum 30 days) will include periods of regular scheduled teaching/training sessions delivered locally and, for many, no additional support will be needed. Study leave may also, with the appropriate local approval, include:

- Undertaking an approved external course aligned to the curriculum: this includes an appropriate course enabling the F2 doctor to meet the curriculum requirement to “deliver standardised CPR in adults” and “manage a cardiac arrest by working with a multidisciplinary team in an emergency situation” (unless already completed in F1) and occasionally other activity intended to support FP doctors achieve their curriculum outcomes.
- Sitting an examination aligned to their future career intention noting that study leave should only be approved for time to sit the exam, not time for preparation/revision.

## **Discretionary Study Leave**

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<sup>3</sup> <https://www.gmc-uk.org/education/standards-guidance-and-curricula/standards-and-outcomes/promoting-excellence>

<sup>4</sup> [https://www.gmc-uk.org/-/media/documents/generic-professional-capabilities-framework--2109\\_pdf-70417127.pdf](https://www.gmc-uk.org/-/media/documents/generic-professional-capabilities-framework--2109_pdf-70417127.pdf)



Best practice and the advancement of medical knowledge in many specialties is shared worldwide. These events, or content of the events, may not be a requirement to cover the curriculum however many can offer enhanced medical knowledge to support personal development or patient care. Such activity is termed discretionary study leave.

Discretionary study leave for international conferences/meetings, providing all other curriculum requirements are met, will be considered (see specific international section below). Reasonable adjustments and consideration of individual circumstances must be given for discretionary study leave applications (including international) from trainees with protected characteristics. For such activities, part-funding may be required reflecting both NHSE and the individual's commitment to their enrichment. If an external body such as a Medical Royal College suggests attendance at an international conference where not already required by their curriculum, in such circumstances, NHSE expects that body to contribute at least 50% of the costs. Any such scenarios would require the specific Head of School approval

Postgraduate qualifications are no longer in curricula so would only be considered in exceptional circumstances. Any such applications must be rationalised by a commitment that the qualification will be integral to the postgraduate doctor's future career.

The Educational Supervisor should be aware of aspirations and performance to assess whether the request is aligned to the individual's PDP, which may contain items in addition to curriculum requirements. All discretionary study leave should therefore be prospectively documented in the PDP having been discussed with the Educational Supervisor.

Discretionary applications must outline the perceived benefits to the trainee at this point in their training. This information will inform faculty when considering approval (i.e., typically, discretionary study leave will require approval beyond ES level, usually by TPD/Head of School or equivalent). A report covering the entirety of the leave may be requested from the trainee after attendance.

Discretionary leave must be judged on its own merit for the circumstances of the individual. However, typically, the following aspects would be considered when assessing the suitability of an application:

- Individual is achieving curriculum competences at/above the expected rate in their programme.
- The activity is truly in line with career trajectory and not a repeat of a similar activity (different learning objectives).
- Previous discretionary applications have been considered to promote fair use of study leave funding.
- The activity provides a skill/competence that is in demand at service level across the NHS or in the individual's intended place of work.
- The approver(s) must assess the educational benefit and value for money of the course. This requires consideration of the relative cost in comparison to other activities and the perceived benefit to the future NHS. The approver(s) must be assured that regional or more cost-effective alternatives have been explored.

## **International Study Leave**

International study leave is not an entitlement and, in general, should usually only be contemplated by exception. International study leave should occur 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 as UK).

One international conference/meeting, providing all other curriculum requirements are met, will be considered for each trainee for any one programme, which can be defined as Foundation, Core, Higher or otherwise every three years (so as not to disadvantage doctors on a run-through programme).

An overseas conference/meeting where the individual will attend remotely (not in person) will usually not be considered as international study leave. However, the suitability of the specific conference/meeting and remote attendance fee should be discussed between the postgraduate doctor and their ES/equivalent. The TPD/equivalent should also be consulted to confirm the impact factor and quality of the specific international leave proposed. Where particularly expensive, approval will usually require the discretion of the local Postgraduate Dean or representative.

If attending an international opportunity is evidenced to be cheaper than a UK alternative/equivalent, then the international opportunity will usually be approved and would not count as the one occurrence above.

If service requirements prevent attendance at a UK based educational opportunity, an international alternative/equivalent could be considered.

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. When the course/conference fee is waived by the course provider, NHSE will consider funding the full cost of economy travel and accommodation. For accommodation, in alignment with the agreed maximum rate for study budget claims within the UK, the overnight rate should not exceed £150 per night. Subsistence expenses will not usually be re-imbursed by NHSE.

As part of the approvals process, requests to attend overseas study courses/conferences will only be considered in exceptional circumstances. Such circumstances include:

- for the presentation of significant research findings from within a National Institute for Health Research (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

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/equivalent about the clear need of the proposed leave to meet curriculum requirements. A full programme should be provided.

Any contribution to funding of such leave will need the prior written approval of the local Postgraduate Dean or delegated representative.

Courses that include leisure activities should be scrutinised. Only the educational component may be supported.

If an individual wishes to fund a period of international study leave by other means, the ES/equivalent should still ensure the activity aligns to the curriculum or PDP. This must be the case for any period of international study leave irrespective of how it is funded.

If further periods of international study leave are required this will be considered on a case-by-case basis by the Postgraduate Dean, and budget allowing.

## **Appeals**

The Postgraduate Dean in each local office is responsible for ensuring that study leave processes are implemented in a fair and transparent way in line with the principles in this document. Trainees can appeal against a study leave decision, the details of which can be found as part of the study leave section of the website: <https://www.hee.nhs.uk/our-work/doctors-training/study-budget-reforms>

## **Appendix A:**

### **Study Leave for all General Practice Postgraduate Doctors in Training – General Principles**

GP doctors in training are referred to the national principles for study leave and local processes.

In all areas, the following principles should apply:

- Individuals should prioritise the locally structured teaching programme over any other courses. This is reflected in them being fully funded for all GP doctors in training.
- Attendance at the locally structured teaching programme and educational supervision with their GP trainer are mandatory and are included within the total contractual study leave allowance.
- GP doctors in training should be meeting core curriculum requirements before considering discretionary enhancement activity. Discretionary activity is defined in the HEE-wide general study leave document.
- GP doctors in training who are progressing satisfactorily may wish to develop an interest in a particular specialty and undertake a limited amount of training to that effect, but they should ensure that this does not hinder their progress or detract from their study of the core GP Curriculum. At all times (with the sole exception of taking an exam or when so advised by a TPD), the locally structured teaching programme should take precedence.
- GP doctors in training should apply for study leave in the way described in their local policy using the process specified in that policy. TPD approval will be required as per local policy.

## Appendix B:

### Study Leave for Dentists in Training – General Principles

Dentists in training are referred to the National Study Leave document. Although local processes may be different for dental study leave the principals in the document will apply:

- Foundation Dentists and longitudinal Dental Foundation Training (DFT)/Dental Core Training (DCT) trainees in the primary care element, attend a mandatory study programme, therefore are not entitled to any additional study leave. Any exception to this can only be at the discretion of the Postgraduate Dental Dean.
- Dentists in training within longitudinal DFT/DCT Training Programmes in the secondary care element attend a mandatory study programme which counts towards study day entitlement. Any additional discretionary study days during the hospital rotation may be agreed locally but must be approved in advance by the relevant Training Programme Director and align to the appropriate DCT curriculum and the individual's PDP.
- In relation to international study leave requests, DCT years 1 to 3 should be viewed as one training programme and therefore one international request allowed in three years. Costs will be paid as per the policy. As per the policy, attendance at an international meeting should occur only when the learning outcomes from the course/ conference are not available in the UK
- Dentists in training should discuss their progress, aspirations and intentions regularly with their Educational and Clinical Supervisors. This should entail discussions in general terms at every Educational Supervision meeting, with more detailed discussions with their Clinical Supervisors at the start and end of every placement. These discussions should be reflected in their PDP.
- In general, dentists in training should be progressing satisfactorily and meeting core curriculum requirements before considering applying for non-mandatory discretionary study leave.
- At all times (with the sole exception of taking an exam or when so advised by a TPD) Regional Teaching programmes provided locally should take precedence over any discretionary study day requests.
- Dentists who are in post CCST training (Certificate of Completion of Specialist Training) will continue to have access to study leave time and funding.
- Dentists in training should apply for study leave as per the local procedure using the specified form.