**A picture containing text

Description automatically generatedIcon

Description automatically generated08.2023 V3 - STUDY LEAVE APPLICATION FORM – UHP use only**

**Postgraduate Doctors in Training, Trust Grade Drs and PA’s**

**This form is not for use by Drs on the foundation training programme**

*Important Notes for APPLICANTS – please also refer to last page*

To ensure your application is not delayed in any way please read & follow the below points. This will ensure quick and efficient processing and final approval of your application. Any queries at all please ring or pop down to the PGMC to speak to one of the team who are always happy to help.

* Please ensure **ALL** sections are completed fully. Incomplete forms will be returned. Please don’t alter any other part of the document
* Completed forms should be sent to your rota team at least **6 weeks** before start date of planned leave.
* Fully completed and signed forms should be sent to the PGME team with as much notice as possible to allow time to process and final approval status.
* Retrospective applications will only be accepted as TIME ONLY – No funding is available for retrospective applications.
* Applications must have full approval and signatures of **all** necessary approvers before sending to PGME team.
* Study leave will be declined if you have not completed the Trust mandatory training – Any problems please contact: [plh-tr.WorkforceDevelopment@nhs.net](mailto:plh-tr.WorkforceDevelopment@nhs.net)
* **Approval/Authorisation will be sent to you from PGME team. Without this approval your study leave may not be funded.**
* **PLEASE NOTE: Leave approved on Healthroster/other leave software DOES NOT confirm Study Leave has been applied for or approved – Healthroster etc. is just for your department rota information.**

***This form will accept all signature formats: Image insert of signature or stylus/mouse pen used on touch screen devices or insert electronic/digital signature - we cannot accept photo's or scans of printed off documents with a "wet" signature as this disables the form – the form can be completed and sent to each person in word format. please do not convert form to different format such as PDF.***

1. **APPLICANT** – completes ***all*** sections numbered **1 to 6** then emails form to ES
2. **ES** – completes section **7** then emails form back to applicant – applicant then emails signed form to rota
3. **ROTA MANAGER/COORDINATOR** – completes section **8** then emails form back to applicant
4. **APPLICANT –** check if TPD approval is required – if so, send completed form to TPD and ensure they complete section **9**
5. **ONLY AFTER SECTIONS 1 to 8** (& 9 if required) **ARE COMPLETED SEND FORM TO** [plh-tr.juniordoctors-studyleave@nhs.net](mailto:plh-tr.juniordoctors-studyleave@nhs.net)

Think Sustainably – please **do not** print this form

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1. Applicants Personal Details** | | | | | |
| 1. Name: | Forename, Surname | | | 2. Home Address | Full address and postcode |
| 3. Grade | Your Grade | 3a. GMC Number (FPA if PA) | GMC Number | 2a. NHS Email Address | NHS Email Address |
| 4. Training Post Programme/Number | Training post number or programme name. | | | 4a. Trust Grade Doctor – **Yes or No** | NO  YES  Trust grade Drs do not need to complete box 11 (of section 2) or section 9 |
| 5. Specialty & ward | Specialty and WARD base | | | 5a. Base Trust | Main Base i.e. Derriford |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2. Details of Leave –** funding is not available if you choose to attend such events during a/l or days off – OVERSEAS? Do not use this form | | | | | |
| 6. Title of Course or Event | Event Name | | | | |
| 7. Venue & Location | Venue Name and TOWN location – Overseas events must use NHSe Overseas application form | | | | |
| 8. No of Days Study Leave Required | Number | 9. Start Date | Click or tap to enter a date. | 10. Finish Date | Click or tap to enter a date. |
| 11. FOR NHSe TRAINEES ONLY  \* Is the Course on NHSe course list under your specialty section? **If Yes please include NHSe course list number & name** | YES:  You must enter the NHSe course list name and number as per the NHSe study leave approved course list available on their website: [course list](https://peninsuladeanery.nhs.uk/about-us/professional-education-and-development/education/doctors-in-training/study-leave-across-the-south-west-2223/)  Click here to enter course name and number  **PLEASE NOTE THE COURSE MUST BE LISTED UNDER YOUR SPECIALTY TRAINING PROGRAMME SECTION**  NO: **If NO - TPD approval is required for any form of funding approval – they must complete section 9** | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **3. Expenses Requested – refer to notes in red and on page 3 –** (estimated costs are acceptable – apart from course fee)  courses costing over £1000 require TPD & NHSe approval. The PGME team will contact NHSe for such approval. \* Courses not on the approved NHSe course list require TPD approval regardless of costs. Please ensure your TPD completes section 9 | | | **amount** – any blank boxes will be considered as NO EXPENSES TO CLAIM |
| **(**If over £1000 your TPD approval is required in section 9**) Course Fees** | | 12. | £Value |
| 13. Type of Transport – Insert Vehicle Reg is using own car: | State if: Own Car/Hire Car/Train/Coach/Plane If own care state vehicle Reg | 13a. Transport Costs if not own car – Or Mileage costs based on standard rate of @ 0.30p per mile if own car | £Value |
| 14. Are you driving and taking a passenger in Car on Same Business – Yes? complete passenger name & £ | YES  NO  Only complete 14a if YES  if Yes enter passenger name here | 14a. Mileage Rate – 0.05p per mile | £ Value |
| 15. No of nights’ accommodation | Number of nights away | 15a. | £ Value |
| 16. No of days ‘subsistence | Number of days away | 16a. | £ Value |
| 17. Other – details: e.g. tolls/parking | Insert Details | 17a. | £ Value |
| **18. Total Requested** | | | **£** **Total Value** |

|  |  |
| --- | --- |
| **4. Mandatory Training – Unfortunately study leave cannot be approved if your trust mandatory training is not up to date** | |
| 19. by ticking the YES box you are confirming that **ALL** your mandatory trust training (on ESR and face to face training) is fully completed and up to date. | YES  NO |

|  |  |
| --- | --- |
| **5. PDP –** trainee to complete parts 20 & 21 prior to es review | |
| 20. Is this event in your agreed PDP? | YES  NO |
| 21. How will it add to your continuing development? | Enter Details |

|  |
| --- |
| **AUTHORISATION SECTION**  PLEASE ENSURE THIS FORM HAS BEEN FULLY COMPLETED BEFORE SIGNING AS NO FURTHER CHANGES TO THE FORM CAN BE MADE ONCE APPROVAL SIGNATURES HAVE BEEN ADDED |

|  |  |
| --- | --- |
| **6. Declaration by Applicant** | |
| 22. I confirm that this application is for study leave appropriate for my level of training and that the expenses detailed will be wholly and necessarily incurred in attending this event. Any financial sponsorship received has been declared. I have read the guidance notes both on this form and on the PGMC/NHSe website. I also confirm that all approvals and signatures have been sought and obtained correctly and in line with the study leave policy. | |
| **PLEASE INSERT SIGNATURE HERE:** | **Date:**  Click or tap to enter a date. |
| **Contact Telephone Number:**  Preferably Mobile Number – for queries |

|  |  |  |
| --- | --- | --- |
| **7. Educational Supervisor Approval** | | |
| 23. I support this study leave application in line with NHSe study leave guidance, curriculum requirements, personalised work schedule & PDP. I confirm this study leave event is relevant at the current state of this Drs training. | | |
| **PLEASE INSERT SIGNATURE HERE:** | **Name:**  Type Name | **Date:**  Click or tap to enter a date. | |

|  |  |  |
| --- | --- | --- |
| **8. Service Line/Rota Approval (For the post in which the leave will be taken)** | | |
| 24. I confirm the leave as detailed above has been added to the Drs Healthroster / rota and the leave time has been approved | | |
| **PLEASE INSERT SIGNATURE HERE:** | **Name:**  Type Name | **Date:**  Click or tap to enter a date. | |

|  |  |  |
| --- | --- | --- |
| **9. TPD Approval – not for trust grade / locally employed drs** | **For Courses not on NHSe approved course list – TPD approval will only permit study leave to be approved for funding at CAT 3. CAT 1 and CAT 2 courses MUST be on the NHSe approved course list to be eligible for funding at that level. TPD approval is required for ALL courses >£1000** | |
| **TPD** – please ensure you read all statements and only tick yes if agreed.  If the course is not on the NHSE approved course list please confirm your approval here at 25a  **If the course fee is over £1000 please confirm your approval HERE at 25b**  if the total course fee is over £1000, the PGME team will seek further approval from NHSe for funding | 25. As TPD I am giving my approval and confirmation that the PG DiT (Applicant) has achieved their core curriculum competencies for their stage of training and this event is on their PDP & suitable for the applicants current stage of training | YES  NO |
| 25a. As TPD I understand, & have discussed with the applicant, that courses not on the NHSe approved list should only be required at the latter stages of training and can only be approved at CAT 3 (50% funded) | YES  NO |
| 25b. As TPD I acknowledge that the full course fee is >£1000 and approve attendance | YES  NO |
| **PLEASE SIGN HERE:** | **Date:**  Click or tap to enter a date. |
|  | **Name**  Type name | **Position**  **TPD – programme** |

APPLICANT: Please email the FULLY completed & signed form to the PGMC via the Junior Study Leave Administrator for final approval & processing **prior to attending the event and with reasonable notice to enable processing – we recommend 6 weeks’ notice**.

Send to: [plh-tr.juniordoctors-studyleave@nhs.net](mailto:plh-tr.juniordoctors-studyleave@nhs.net) **Failure to do so may affect approval and available funding.**

**DUE TO THE VOLUME OF APPLICATIONS RECEIVED EACH DAY the PGME team will reject any incomplete or unsigned applications.**

**Please also do not submit pdf or paper versions of this form – all applications must be submitted by email in word format to enable processing and recording by the PGME team. Thank you for your cooperation – this will ensure speedy processing of your application.**

|  |  |  |
| --- | --- | --- |
| **10. Postgraduate Medical Education Centre (PGMC) – Check List - Administration use only** | | |
| All sections fully completed | Yes  No | Any Sections not complete – return form to applicant |
| Educational Supervisor - Approval Given | Yes  No | If No – return form to applicant |
| Rota Coordinator - Approval Given | Yes  No | If No – return form to applicant |
| TPD Approval Required  Please Note – TPD can only approve courses at cat 3 if not on course list – they cannot approve any courses at cat 1 or cat 2 | Yes  No  Not required | If Yes – TPD Approval Given?  Yes  No  If No – return form to applicant |
| All of the above completed correctly | Yes  No | If Yes – Move application to MEM folder for final approval  If No – APPLICATION Form returned to Applicant and correspondence saved in Drs correspondence folder |

|  |  |
| --- | --- |
| **11. MEM Final Financial Approval – either 11a or 11b – MEM / PGME team use only** | |
| 11a: Based on the information contained within this application and in line with NHSe Study Leave Guidance, I approve this study leave activity for funding:  CAT 1  CAT 2 CAT 3  Course number on HEE list | 11b: Based on the information contained within this application and in line with NHSe Study Leave guidance, this study leave has been processed and approved for funding as follows:  Reply Letter Required: Choose an item.  **Enter details of approval given if not covered in section 11a** |
| **Signature of MEM:** | **Date Approved:**  Click or tap to enter a date. |
| OR: | |
| **No expenses claimed – Application processed by:**  Name of administrator | **Date Processed:**  Click or tap to enter a date. |

**Trainee Guide** - We hope we have made this form as user friendly as possible and by completing each section in order (and reading any notes) it should be painless to complete and send to us for a quick turnaround.

We would advise you not to commit financially to the activity until you have confirmation from PGMC that funding is approved.

After the event, please submit your expense claim to PGMC; attaching **certificate of attendance and all receipts within 10 weeks of attending** (the expense claim form is sent to you once we’ve received your completed application and final approval has been granted).

Inform PGMC if this study leave is cancelled via plh-tr.juniordoctors-studyleave@nhs.net

**GP trainees** in **hospital placements** will need to apply for study leave budget following the new process detailed on NHSe website.

**NOTE: Courses not on the NHSe approved course list require TPD categorisation & approval, regardless of cost.**

**Regardless of category, PGMC will seek further approval from NHSe for all courses costing £1000+**

*If you are unsure of any aspect of the study leave policy or process, please do not hesitate to contact a team member at the Postgraduate*

*Medical Education Centre using the Junior Drs Study Leave email address, pop down to see us or call 01752 4 37907.*

*To help, here is a very brief breakdown of the process:*

1. *Complete the application form fully – making sure no boxes are left empty.*
2. *Don't forget to check the NHSe course list and enter the course name and course number on your application form.*

[*https://peninsuladeanery.nhs.uk/about-us/professional-education-and-development/education/doctors-in-training/study-leave-across-the-south-west-2223/*](https://peninsuladeanery.nhs.uk/about-us/professional-education-and-development/education/doctors-in-training/study-leave-across-the-south-west-2223/)

1. *Send your signed application form to your ES in the first instance – if they approve the course, they will insert their signature in the correct section of the form and send it back to you. (TPDs will also need to be contacted for approval if the event is not on NHSe course list)*
2. *Send that signed form to your rota manager/coordinator to approve the time off – they will insert their signature in the correct section of the form and send it back to you.*
3. ***Send the fully completed and fully signed form to us for final approval and financial approval – DO NOT SEND TO US IF INCOMPLETE OR SIGNATURES MISSING as it will be rejected.***
4. *The above should be done at least 6 weeks before the study leave events start. Can you please ensure the form is completed fully and fully signed before sending to us as that saves a lot of query time and means we can process application faster – please also ensure signatures are inserted onto the same document across the board as we cannot accept image attachments, written signatures, or multiple versions of the same form with different signatures on each version.*

**Educational Supervisor Authorisation**

Please note you need to review the application against curriculum requirements, personalised work schedule and the personal

development plan

Authorise study leave in a timely manner in accordance with NHSe processes and timescales.

Approve the study leave application by signing in the Educational Approval Section

Please note the above regarding who else needs to give approval regarding costs & NHSe approved course list.

**Excluded Expenses**

Certain expenses are excluded and will not be re-imbursed regardless of the status of your study leave application. Please refer to:

<https://peninsuladeanery.nhs.uk/about-us/professional-education-and-development/education/doctors-in-training/study-leaveacross->

[the-south-west-2223/](https://peninsuladeanery.nhs.uk/about-us/professional-education-and-development/education/doctors-in-training/study-leaveacross-) and the section on **Excluded Expenses** for more information.

**For further details & the full Study Leave policy & process, including travel and subsistence expenses guide, please refer to PGME Plymouth Webpage -** <https://www.pgmeplymouth.com/>

**or NHSe -** <https://peninsuladeanery.nhs.uk/about-us/professional-education-and-development/education/doctors-in-training/study-leave-across-the-south-west-2223/>