

Lead Employer
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Guardian Of safe Working. Guidelines for GP trainers 2019

Dear GP Trainer

As we welcome trainees into their new placements following August changeover, I wanted to take the opportunity to write to you and share some general advice reflecting the questions and queries that I get asked regularly by our GP Specialty Trainees (GPST).

In my role as Guardian of Safe Working for StHK Lead Employer for all GP Specialty trainees in the North West, West Midlands, East of England, East Midlands and Thames Valley, I would welcome the opportunity to work with you to enable greater consistency across the patch regarding working arrangements for trainees and in particular the importance of the work schedule.

I appreciate as a GP trainer myself that we are all pragmatic and that largely GP training gets excellent feedback. I would not wish to hinder this in the slightest.

Here goes

- 1) The GPST is supernumerary and any leave and study requests should be granted unless there are seriously good reasons for them to be denied.
- 2) Study leave should not be used for mandatory training, but is part of the educational component of the schedule.
- 3) The generic workplace schedule that appears in the contract is just that. It is generic and will have been checked so that it reflects 40 hours work per week and is the mechanism by which the GPST gets paid. It does not have to reflect accurately what they might do on a day to day basis.
- 4) The personalised workplace schedule is the day to day working practice and should be written down and agreed with each GPST during their induction period and by 4 weeks from start date with the educational supervisor.
- 5) Points to remember about the workplace schedule
 - a) There should be no gaps in the working day.
 - b) The GPST is allowed 30 mins break if a shift is more than 5 hours and if over 9, they are entitled to 2 breaks, ideally protected.
 - c) There should be 12 hours training and 28 hours of service.
 - d) Breaks and admin time come out of the service element of the timetable.

- e) Do not give the GPST 30 mins in lieu of "out of hours" every week. It is far better to give them time off in lieu (TOIL) in a block when they have worked the session.
- f) TOIL should ideally be in the following week after the work is done but this is negotiable.
- g) Training time normally includes 4 hours half day release, 4 hours for personal study and 4 hours tutorial or teaching in practice. This is pro-rata for less than full time trainees.
- h) If you give the personal study day on the same day as the HDR, the GPST is still entitled to 30 mins break.
- i) GPST can do "extended hours" and this is facilitated by them starting later in that day usually.
- j) The contract was designed to be 8 hours per day over a 5 day period, but a number of GPSTs work over 4 days. This is fine as long as breaks are considered.
- k) Part time working is generally a pro-rata calculation of the above criteria. This does not always work well with the HDR and personal study and consideration should be given to the fact that the HDR is a one year course and that in the placement post 1 year personal study can be made up with the agreement of the registrar so as to balance out.
- 6) Every GPST and trainer should have access to the Allocate system for processing exception reports. If you do not have access please request it from medical.hr@sthk.nhs.uk
- 7) Exception reporting is not to be discouraged by trainers and should be seen as a positive experience to improve the GPST training experience.
- 8) GPSTs can report either extra hours worked or a failure in teaching time.
- 9) Any exception report will be notified to the trainer and the Guardian and the trainer has 7 days to discuss with the GPST and reach a conclusion which must be recorded on the Allocate system. Guidance is available here. The GPST is asked to accept the outcome on the system.
- 10) The normal outcome is very often TOIL and again this should be taken as soon as possible.
- 11)GPSTs can exception report on extra hours worked as well as educational activities required for successful completion of ARCP e.g. failure in teaching time, e-portfolio, etc. A full overview can be found here.

I do hope that helps with the forthcoming year. If there are any questions or problems I can be contacted direct by mail on peter.arthur@sthk.nhs.uk

You are welcome to read the reviewed guidance from the **BMA**

Kind regards

Dr C P Arthur FRCGP

Guardian of safe Working.