



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Guide to

HSE National Flexible Training Scheme

For Higher Specialist Trainees

November 2013

The HSE National Flexible Training Scheme

The medical workforce is changing and, over recent years, numerous reports have pointed to the importance of providing flexible working arrangements for doctors. The HSE National Flexible Training Scheme for Higher Specialist Trainees is a national scheme managed and funded by the Health Service Executive's Medical Education and Training (MET) Unit.

The scheme provides for a limited number of supernumerary places to facilitate doctors at higher specialist training level to continue their training in a flexible manner for a set period of time. Trainees must be enrolled in a Higher Specialist Training Programme under the auspices of one of the postgraduate medical training bodies recognised by the Medical Council in Ireland.

This Guide sets out details of the National Flexible Training Scheme and provides information for trainees, training bodies and employers about the programme.

Funding arrangements and flexible training places

As of December 2011, the equivalent of 12 whole time funded places are available on the HSE's National Flexible Training Scheme. The actual number of higher specialist trainees currently engaged in the Scheme at any given time ranges from 20 – 26 depending on the percentage of full-time working which each trainee is engaged in.

Places are therefore limited and applications are considered in the order in which they are received. There is no guarantee that an applicant will be successfully placed on the scheme but each application is considered on its own merits and within the capacity of the scheme and the resources available to the MET Unit at any given time.

Funding is provided by the MET Unit directly to the employing authority for each flexible trainee. The funding provided covers:

- Flexible trainee's salary
- Associated Employers PRSI

In addition, trainees on the National Flexible Training Scheme are entitled to apply through their training body for the HSE SpR/SR Specialist Training funding scheme and through their employer for the HSE Clinical Course / Exam Refund Scheme. Both of these programmes are funded by the MET Unit

Employers should note that other costs, including on-call costs / other additional payments/ trainers' grants etc. are not provided within the MET Unit's funding for this programme.

The MET Unit will designate the whole time equivalent (employment ceiling adjustment) for the relevant hospital / service for the duration of the flexible training post and this will be notified by the MET Unit to the HSE's National Employment Monitoring Unit.

Who can apply to the National Flexible Training Scheme?

Applications for flexible training may be made by any trainee currently enrolled in a higher specialist training programme or a trainee who is due to commence in a higher specialist training programme in the next immediate intake to the programme. Trainees must be enrolled in a Higher Specialist Training Programme under the auspices of one of the postgraduate medical training bodies recognised by the Medical Council in Ireland at the time of commencement of flexible training and throughout their flexible training post.

All applicants must have well founded individual reasons for flexible training. Applications for flexible training in order to pursue other paid work, paid non-medical interests or to engage in research will not be considered by the HSE MET Unit.

The most common reasons to date for individual higher specialist trainees making an application to the National Flexible Training Scheme include

- Responsibility for caring for others (e.g. children or elderly relatives) and
- Personal family circumstances.

When can trainees apply to the National Flexible Training Scheme?

Applications may be made for flexible training :

1. By trainees who have been accepted onto the next immediate intake to HST. Such applicants may apply for flexible training prior to commencing in HST.
2. Existing higher specialist trainees may apply for a position on the HSE National Flexible Training Scheme at any stage throughout his / her training but it is generally recommended that the final year of higher specialist training be full time.

In order to allow the timely management of the allocation of higher specialist trainees to clinical sites, and to minimise any potential service implications if an application for flexible training is successful, potential applicants must give as much notice as possible of their intention to apply for flexible training from a specific date to both the HSE-MET Unit and their respective training body.

Applications for flexible training may be made up to 12 months in advance of the proposed date of commencement of flexible training and no later than 4 months in advance of the proposed date of commencement.

Prospective applicants should note that applications are considered in the order in which they are received so early application is advised.

Structure of Flexible Training Posts on the National Flexible Training Scheme

Applicants may propose the structure of flexible training posts within certain parameters. Each flexible training post must be not less than 40% full time and no greater than 60% full time. The working pattern of a flexible trainee must be managed over a maximum of a two week reference period, meaning that of every two week period, at least 40% of time must be worked, with the exception of approved leave in line with the NCHD Contract 2010. As of July 2011, no flexible trainee may work less than 40% of any two-week period.

Examples of acceptable flexible training working arrangements:

- Two days on, three days off per working week
- 2.5 days on, 2.5 days off per working week
- Three days on, two days off per working week
- One week on, one week off

It is important that a flexible trainee has similar exposure to learning and experience – including on-call duties – as their full-time colleagues. Therefore, higher specialist trainees on the National Flexible Training Scheme will be expected to partake in on-call duties/ on-call rotas on a pro-rata basis.

Higher specialist trainees who are accepted onto the National Flexible Training Scheme will be managed on a supernumerary basis. This means that such trainees join their designated clinical service / department and will be additional to the allocated establishment of higher specialist trainees in that service or department.

It is therefore essential that there is enough training capacity within the department/service for the flexible trainee in order to ensure that they continue to progress along their higher specialist training pathway and achieve educational credit from their respective postgraduate medical training body.

In line with HSE regulations for the appointment of locum / temporary consultant posts, no higher specialist trainee – including flexible trainees – is permitted to “act up” during their flexible training post.

Duration of Flexible Training Posts

The number of available flexible training posts is limited. Therefore, all trainees should have an equal opportunity to apply for a flexible training post for specified periods.

Each approved flexible training post will ordinarily be for up to 12 months. Any trainee appointed to a flexible training post and who wishes to continue in flexible training after this period will be required to re-apply. No preference will be given to trainees already on the flexible training scheme for subsequent periods on the scheme. Early application for subsequent periods of flexible training is therefore advised.

Flexible training posts will ordinarily be for the period July to July each year, in line with the training year. Where vacancies on the scheme arise at other times of the year, applicants may be allocated to available slots. In such cases, trainees will ordinarily be allocated to a flexible training post up to the end of the training year and such trainees will be required to re-apply for any subsequent period of flexible training.

Prospective applicants should note that deferral of flexible training places is not permitted. An applicant who cannot take up a flexible training post on the specified date of commencement must re-apply.

Eligibility Criteria to Apply

Applicants to the National Flexible Training Scheme must meet the following eligibility criteria:

1. Be registered (or registered on the date of commencement of higher specialist training) on the **Trainee Specialist Division** of the Register of Medical Practitioners maintained by the Medical Council (of Ireland). It is the applicant's responsibility to ensure that they are appropriately registered; the process for registration is entirely separate to the process for application for flexible training.
2. Be enrolled on a **higher specialist training programme** or have been accepted onto the next immediate intake to HST under the auspices of one of the Irish postgraduate medical training bodies. This process is completely separate from the application process for the National Flexible Training Scheme and is managed directly by the relevant postgraduate training body.
3. Hold the **NCHD Contract 2010** at the time of commencement of the flexible training post.
4. Have a **valid reason** for applying for flexible training.
5. Have completed and submitted all of the **required documentation** at the required times, to the satisfaction of the MET Unit.

Continuing in Flexible Training

If an individual's application is successful and a period of flexible training is undertaken / completed, there is no automatic entitlement to continue in flexible training. Such trainees are required to re-apply for any further periods of flexible training. This is to ensure that all applicants have an equal opportunity to train on a flexible basis. Please note preference cannot be given to a trainee already on the programme. All applications will be considered on an individual basis.

Terms and Conditions of Employment

All individuals participating in the HSE National Flexible Training Scheme are issued with the NCHD Contract 2010 by the relevant employing authority, and are subject to the terms and conditions of that employment contract. Issues like salary, annual leave, educational leave etc. will be managed on a pro-rotta basis by the employer in line with the agreed clinical work patterns of the individual higher specialist trainee.

Application Process

The application process for the National Flexible Training Scheme is a two step process. Each step is outlined below:

Application Stage 1: Expression of Interest

The purpose of this stage is to allow the trainee to formally register their interest in the National Flexible Training Scheme with the MET Unit and to provide information to the MET Unit which will enable the HSE to make an initial assessment of the application.

If you wish to apply for flexible training, you should:

1. Determine whether you are eligible to apply by consulting the eligibility criteria above and, if eligible,
2. Complete and submit an *Expression of Interest Form*, a copy of which is provided at Appendix A, to the MET Unit.

The MET Unit will consider the application and will contact the applicant, advising them whether:

1. A post is expected to be available and the trainee may proceed to stage 2 of the process.
2. A post is not available but the application is appropriate for inclusion on the reserve list for vacancies. The applicant will be informed of their position on the reserve list. Vacancies will be filled in the order of the placement of applicants on the reserve list, which in turn is based on the order in which applications are received.
3. The application is not appropriate for a flexible training post.

All decisions made by the MET Unit at Stage One will be notified directly by the Unit to the relevant training body representative (Dean/ National Specialty Director/ Programme Director) to ensure that all parties are aware of the status of applications for flexible training.

All decisions by the MET Unit are final.

Application Stage 2 – Detailed Application Form

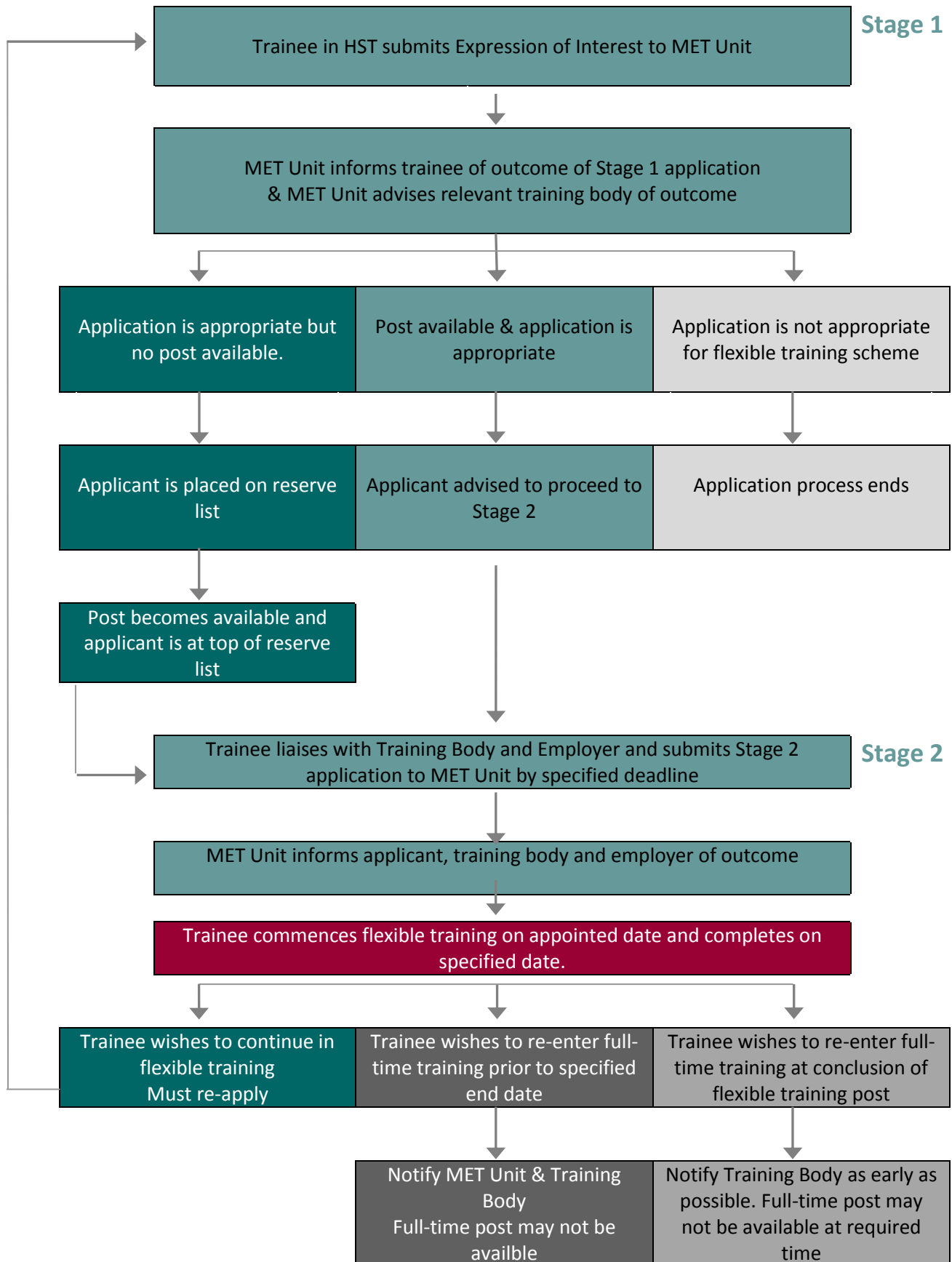
If an applicant is advised by the MET Unit that they may proceed to Stage Two of the application process, the applicant must complete and submit to the MET Unit the *Detailed Application Form*, a copy of which is provided at Appendix B.

The purpose of this stage is to provide the MET Unit with both the training details and the employment details of the proposed flexible training post. The *Detailed Application Form* must be signed by

1. the applicant,
2. the relevant training body representative (Dean/National Specialty Director/ Programme Director) and
3. the employer (HR Manager/ Medical Manpower Manager/ Hospital Manager).

It is the responsibility of the applicant to ensure that the necessary approval is obtained from both the training body and the employer in a timely manner. A deadline for submission of the Stage 2 application form may be applied in order to secure the flexible training post.

Application Process for National Flexible Training Scheme



Appendix A:

Stage 1: Expression of Interest for HSE National Flexible Training Scheme

Note: Stage 1 & Stage 2 application forms must be completed by typing in the responses and signing the form. Hand-written applications will not be accepted.

Section A – Personal Details

1	First Name:	<input type="text"/>
2	Last Name:	<input type="text"/>
3	Postal Address:	<input type="text"/>
4	E-mail Address (mandatory)	<input type="text"/>
5	Home Telephone Number (optional):	<input type="text"/>
6	Mobile Telephone Number (mandatory):	<input type="text"/>
7	Work Telephone Number (optional)	<input type="text"/>

For HSE Use only:	
HSE Date of Receipt	HSE Ref:
	Reviewed:
	Date:
	Signed:
	MET official:
	Status:

Section B – Medical Council Registration

8	Name in which you are registered with the Medical Council (of Ireland)	<input style="width: 100%; height: 25px;" type="text"/>										
9	Medical Council registration number	<input style="width: 25px; height: 25px;" type="text"/> <input style="width: 25px; height: 25px;" type="text"/> <input style="width: 25px; height: 25px;" type="text"/> <input style="width: 25px; height: 25px;" type="text"/> <input style="width: 25px; height: 25px;" type="text"/> <input style="width: 25px; height: 25px;" type="text"/>										
10	Please indicate (with an “X” in the appropriate box) the division of the Medical Council (of Ireland)’s register you are currently registered	<table border="0" style="width: 100%;"> <tr> <td style="width: 80%;">(i) Trainee Specialist Division</td> <td style="width: 20%; text-align: center;"><input style="width: 100%; height: 25px;" type="checkbox"/></td> </tr> <tr> <td>(ii) General Division</td> <td style="text-align: center;"><input style="width: 100%; height: 25px;" type="checkbox"/></td> </tr> <tr> <td>(iii) Supervised Division</td> <td style="text-align: center;"><input style="width: 100%; height: 25px;" type="checkbox"/></td> </tr> <tr> <td>(iv) Specialist Division</td> <td style="text-align: center;"><input style="width: 100%; height: 25px;" type="checkbox"/></td> </tr> <tr> <td>(v) Not registered</td> <td style="text-align: center;"><input style="width: 100%; height: 25px;" type="checkbox"/></td> </tr> </table>	(i) Trainee Specialist Division	<input style="width: 100%; height: 25px;" type="checkbox"/>	(ii) General Division	<input style="width: 100%; height: 25px;" type="checkbox"/>	(iii) Supervised Division	<input style="width: 100%; height: 25px;" type="checkbox"/>	(iv) Specialist Division	<input style="width: 100%; height: 25px;" type="checkbox"/>	(v) Not registered	<input style="width: 100%; height: 25px;" type="checkbox"/>
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(iii) Supervised Division	<input style="width: 100%; height: 25px;" type="checkbox"/>											
(iv) Specialist Division	<input style="width: 100%; height: 25px;" type="checkbox"/>											
(v) Not registered	<input style="width: 100%; height: 25px;" type="checkbox"/>											

Section C – Details of Higher Specialist Training

11	Name of Training Body enrolled with:	<input style="width: 100%; height: 25px;" type="text"/>
12	Name of Higher Specialist Training Programme:	<input style="width: 100%; height: 25px;" type="text"/>
13	Date of entry onto Higher Specialist Training Programme: (DD-MM-YYYY)	<input style="width: 25px; height: 25px;" type="text"/> <input style="width: 25px; height: 25px;" type="text"/> <input style="width: 25px; height: 25px;" type="text"/> <input style="width: 25px; height: 25px;" type="text"/> <input style="width: 25px; height: 25px;" type="text"/> <input style="width: 25px; height: 25px;" type="text"/> <input style="width: 25px; height: 25px;" type="text"/> <input style="width: 25px; height: 25px;" type="text"/> <input style="width: 25px; height: 25px;" type="text"/> <input style="width: 25px; height: 25px;" type="text"/>
14	Current Year of Training:	<input style="width: 100%; height: 25px;" type="text"/>
15	Number of expected years of training remaining (on a full-time basis) prior to award of CCST:	<input style="width: 100%; height: 25px;" type="text"/>
16	Name of National Specialty Director (/Programme Director/Dean of Training Programme)	<input style="width: 100%; height: 25px;" type="text"/>

Section D – Previous Flexible Training

17 Are you currently in a flexible training post? Yes

No

18 Have you previously been in a flexible training post? Yes

No

19 If you answered “yes” to either of the above questions, please state the start date and end date of the post, or most recent post if more than one: (DD-MM-YYYY)

Start date:

		-			-				
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End Date:

		-			-				
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Section E – Reason for Application to National Flexible Training Scheme

20 Please outline below your reasons for seeking a position on the National Flexible Training. You may attach additional sheets as required. Please note that all information provided in this section will be treated as confidential by the HSE MET Unit.

Section F – Proposed Structure of Flexible Training

- 21 Proposed start date for flexible training:

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- 22 Proposed end date for flexible training:

		-			-				
--	--	---	--	--	---	--	--	--	--
- 23 Proposed % work commitment
(must be between 40% and 60%)

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- 24 Proposed clinical practice working pattern (e.g. 2 days on/3 days off; one week on/one week off etc.)
Note: working pattern must be over a reference period of 2 weeks i.e. at least 40% of every 2-week period must be worked

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Section G – Signature

- 25 Signature of Applicant:

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- 26 Printed name of Applicant:

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- 27 Date (DD-MM-YYYY):

		-			-				
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Submission of completed form:

Please return the completed application form:

1. by e-mail to Assumpta.linnane@hse.ie
- AND
2. original signed copy by post to Ms. Assumpta Linnane, HSE National Flexible Training Scheme Coordinator, Medical Education and Training Unit, Room 1.24 Dr. Steevens' Hospital, Dublin 8.

Queries to: Assumpta Linnane
E: Assumpta.linnane@hse.ie
T: 01 6352052

Appendix B:

Stage 2: Detailed Application Form for HSE National Flexible Training Scheme

Note: Stage 1 & Stage 2 application forms must be completed by typing in the responses and signing the form. Hand-written applications will not be accepted.

Note - This form must be completed and signed by:

1. the individual higher specialist trainee applicant
and
2. the relevant training body representative (Dean / National Specialty Director / Programme Director)
and
3. the relevant employer representative (HR Manager / Medical Manpower Manager / Hospital Manager)

Section 1 – Personal Details

(To be completed by Applicant)

1	First Name:	
2	Last Name:	
3	E-mail Address:	
4	Mobile Telephone Number:	
5	Medical Council Registration Number:	

For HSE Use only:			
HSE Date of Receipt		HSE Ref:	
		Reviewed:	
		Date:	
		Signed:	
		MET official:	
		Status:	
Post:	Database ref:		TB ref:

Section 2 – Details of Higher Specialist Training Programme

(To be completed by Training Body Representative)

6	Name of Training Body:	<input style="width: 100%; height: 25px;" type="text"/>				
7	Name of Higher Specialist Training Programme:	<input style="width: 100%; height: 25px;" type="text"/>				
8	Original date of entry onto Higher Specialist Training Programme: (DD-MM-YYYY)	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>				
9	Original expected date of completion of training: (DD-MM-YYYY) – based on full-time training	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>				
10	Duration of HST training completed to date:	<input style="width: 100%; height: 25px;" type="text"/>				
11	Duration of HST training remaining (on a full-time basis) prior to award of CCST:	<input style="width: 100%; height: 25px;" type="text"/>				
12	Is the Training Body supportive of the trainee's application for flexible training?	<table border="0" style="margin-left: 20px;"> <tr> <td style="padding-right: 10px;">Yes</td> <td><input style="width: 50px; height: 25px;" type="text"/></td> </tr> <tr> <td>No</td> <td><input style="width: 50px; height: 25px;" type="text"/></td> </tr> </table>	Yes	<input style="width: 50px; height: 25px;" type="text"/>	No	<input style="width: 50px; height: 25px;" type="text"/>
Yes	<input style="width: 50px; height: 25px;" type="text"/>					
No	<input style="width: 50px; height: 25px;" type="text"/>					
13	Proposed date of commencement of flexible training:	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>				
14	Proposed date of completion of flexible training:	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>				
15	Proposed host institution for applicant (name of hospital / service):	<input style="width: 100%; height: 25px;" type="text"/>				
16	Name of trainer to whom trainee will be assigned:	<input style="width: 100%; height: 25px;" type="text"/>				
17	Expected date of commencement in host unit:	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>				
18	Expected date of completion in host unit:	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>				
19	Proposed % of full-time working which the training body is in agreement with:	<input style="width: 100%; height: 25px;" type="text"/>				

20 Proposed clinical work pattern

Typical weekly timetable (exclusive of on-call commitments)
State "work" or "off" in each box as appropriate

	AM	PM
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

If the working pattern is different in the second of the 2-week reference period, please complete the table below in respect of the second week

Typical weekly timetable Week 2 (exclusive of on-call commitments)
State "work" or "off" in each box as appropriate

	AM	PM
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

21 Proposed on-call commitment:

Typical Full-time on-call commitment: 1 in

Pro-rata on-call commitment: 1 in

22 Name of National Specialty Director (/Programme Director/Dean of Training Programme)

Training Body representative: please sign accompanying signature page (page 5)

Section 3 – Employment Details for post as agreed with Training Body

(To be completed by Employer representative – HR Manager / Medical Manpower Manager / Hospital Manager)

Employers please note that the MET will transfer the basic salary cost and employer's PRSI to the hospital / service and will transfer the WTE for the duration of the flexible trainee's period of employment at the hospital / service whilst in an approved flexible training post.

23 Name of Employing Authority:

24 Address of Employing Authority:

25 Is the Employer supportive of the trainee's application for flexible training within the capacity of the service / department and within the proposed start and end dates and within available funding?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

Employers should note that the funding available for flexible trainees is for the trainee's salary and associated employer's PRSI. Other costs, including on-call, other additional payments, trainers' grants etc. are not available within the MET Unit's funding for this programme.

26 Does the Employer approve of the proposed work pattern and on-call commitment for the proposed flexible training post?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

27 Comments from Employer
The Employer should use the box below to provide any comments on the application, if required.

Employer: please sign accompanying signature page (page 5)

Section 4 – Signatures

28 Signature of **Applicant**:

Date:

29 Signature of **Training Body**
representative:

Printed Name of Training Body representative:

Title of Training Body representative:

Date:

30 Signature of **Employer's** representative:

Printed Name of Employer representative:

Title of Employer representative:

Date:

Submission of completed form:

Please return the completed application form:

1. by e-mail to Assumpta.linnane@hse.ie

AND

2. original signed copy by post to Ms. Assumpta Linnane, HSE National Flexible Training Scheme Coordinator, Medical Education and Training Unit, Room 2.41, Dr. Steevens' Hospital, Dublin 8.

Queries to: Assumpta Linnane
E: Assumpta.linnane@hse.ie
T: 01 6352052

Hard copy forms without the required three signatures should not be submitted to the MET Unit.