



Doncaster and Bassetlaw  
Teaching Hospitals  
NHS Foundation Trust

# DBTH Study, Professional & Duty Leave Policy for Medical Staff

This is a new policy. This procedural document supersedes the section previously included in: CORP/EMP 49 v.3 – Leave Policy (including Annual, Study, Professional and Duty for all staff, including medical)



## Did you print this document yourself?

The Trust discourages the retention of hard copies of policies and can only guarantee that the policy on the Trust website is the most up-to-date version. **If, for exceptional reasons, you need to print a policy off, it is only valid for 24 hours.**

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Target audience:	Trust-wide Medical Staff (Consultant, SAS & LED)

## Amendment Form

Please record brief details of the changes made alongside the next version number. If the procedural document has been reviewed **without change**, this information will still need to be recorded although the version number will remain the same.

Version	Date Issued	Brief Summary of Changes	Author
Version 1	April 2026	<ul style="list-style-type: none"> <li>• New policy, please read throughout. This policy details the DBTH training framework, study leave principles and access to funding arrangements for all medical colleagues except for doctors in training. There is a separate policy for all other staff.</li> </ul>	L Caygill

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## 1 INTRODUCTION

Our ambition is to improve the working lives and experiences of all our people at #TeamDBTH and to embed an inclusive and open organisational culture. As such, ensuring we have a workforce with the right skills and tools to do their jobs is fundamental to us achieving our vision statement *Healthier together – delivering exceptional healthcare for all* (DBTH 2024). As a Teaching Hospital, the education of our people is important. Our people are critical to the continuing and future success of DBTH. We need a fair, transparent, and consistent approach to medical study/professional/duty leave allowing equal access to opportunities to support our people to reach their potential (DBTH People Strategy 2023).

## 2 PURPOSE

The purpose of this policy is to set out our approach to medical staff study/professional/ duty leave (definitions and details in section 4) including access to funding in a fair, transparent, and consistent manner. This policy describes resources available to our medical colleagues: Consultants, Specialist Associate Specialist and Specialty (SAS) doctors, and Locally Employed Doctors (LEDs), subject to approval both in terms of funding and time provision and is linked to the revalidation process. The policy supports the General Medical Council (GMC 2024) [Good Medical Practice Domain 1- Knowledge, skills and development](#) which requires our medical colleagues to:

- Provide a good standard of practice and care, and work within your competence.
- Keep your knowledge and skills up to date.

This policy fulfils the contractual obligation provided in the Terms and Conditions of Service, Consultants (England) 2003 Handbook, 2008 Specialty Doctor and Associate Specialist Contract, 2021 Specialty Doctor Contract and the 2021 Specialist Contract.

Postgraduate Doctors in Training should continue to follow the NHS England (NHSE) doctors study leave guidance ([view link here](#)).

Undergraduate Medical Students should follow the School of Population Health and Medicine (Higher Education Institute), University of Sheffield guidance.

## 3 DUTIES AND RESPONSIBILITIES

Individual duties & responsibilities are detailed in this section.

### 3.1 Chief People Officer (CPO)

As the executive lead for education, has the responsibility for ensuring that the organisation supports medical staff study leave and funding and that there is a fair, consistent, and transparent funding application processes with clear procedures.

### **3.2 Director of Education and Research (DoE&R)**

Overall responsibility for the commissioning, monitoring, and reporting of the effective use and allocation of education resources to meet the organisational need in line with local and regional policy detailed within the national education contract.

### **3.3 Associate Director of Education (ADoE)**

Provide second line resolution for any appeals unresolved at divisional level. Will consider appeals based upon the appropriateness of the activity applied for, requests taking the applicant over the usual 10 days per annum and any requests for funding which exceed the annual limit.

### **3.4 Medical Directors Office (MDO)**

Provide advice and guidance to the DoE&R and/or ADoE regarding matters such as professional standards and equity in association with this policy.

### **3.5 Business Manager Education & Research**

Responsible for the procurement, management and reporting of the financial resources and spend against an agreed education budget.

### **3.6 Divisional Directors**

Responsible for the application of this policy and overall authorisation within the Division. Responsible for the proportionate funding allocation aligned to the Division's medical workforce.

### **3.7 Authorised Approvers**

With delegated authority issued by the Divisional Director, responsible for the consideration and management of study/professional/duty leave applications and funding requests made by individual applicants in line with this policy.

General responsibilities include:

- Being aware of this policy and the procedures within it and the potential consequences of non-compliance.
- Ensuring that study/professional/duty leave arrangements are discussed with their Clinical Directors/Leads to enable effective scheduling of activity.

- Discuss development opportunities to meet appraisal and professional development needs. This process should consider the appropriateness of study/professional/duty leave with due consideration to meet contractual obligations. This should be an integral part of the Division's business and financial planning. This role may be delegated accordingly.
- Authorisation to approve up to 30 days study/professional leave over a 3-year period (equating to 10 days per year- this is a total for both study and professional leave) for everyone within their specialty covered by this policy and will normally grant leave to the maximum extent consistent with maintaining essential services.
- Confirming that the applicant is compliant with their SET training requirements (90% or has future enrolments within 6 months of the application date) before approving leave. There may be exceptional circumstances where this is overruled for patient safety/service delivery needs.
- Confirming that sufficient budget is available when study leave is granted; although the costs of courses and conferences approved for study leave will normally be funded, this cannot be assumed.
- Agreement to the payment of costs will be subject to available funding (Funding requests for divisional authorisation for medical colleagues is capped at **£3000.00** per 3-year cycle (aligned with the individuals leave year) with a limit of **£800.00** per individual trip for overseas study and this must be agreed in advance. Essential continued professional development (CPD) should be funded as a priority and should be linked to service development and improvement. This includes ensuring that when a doctor is employed by the Trust and another employer, that only the proportion of leave and funding for the Trust is authorised.
- Ensuring that cover is arranged for the clinician granted leave and that there is sufficient budget available to provide cover, where costs are incurred.
- Only granting professional leave where the service impact can be managed effectively, and the Trust considers that the purpose of the leave is of importance to the Trust or the wider NHS.
- Where an individual is expected to attend a course during their day(s) off, authorising a leave day in lieu of a mutually agreed time; this should be agreed in advance.
- All requests for study/professional/duty leave and funding should be made with a minimum of six weeks' notice. Authorise as soon as possible (usually within 5 working days) any request for study/professional/duty leave that has been received in full.
- Keep a record of all study/professional/duty leave applications and funding via the approved electronic system for individuals and notify them when their full allocation has been used.

### 3.8 SAS Tutor

Responsible for supporting authorisers in the consideration and management of study/professional/duty leave and funding requests made by the Specialist Associate Specialist and Specialty (SAS) doctors.

Key liaison with the SAS regional tutor to access the NHSE SAS professional development funding. This includes seeking approval for large value training requests and equal allocation of funds.

Chair of the SAS Education Committee with oversight of above funding usage and allocation of places on bespoke SAS education development programme that has been created around the 4 GMC domains of Good Medical Practice (2024).

### 3.9 Divisional/Departmental Rota Co-ordinators

Responsible for the management of rotas to support the safe allocation of study/ professional/duty leave requests following the approval process.

### 3.10 Consultant, Locally Employed Doctors, and Specialist, Associate Specialist and Specialty (SAS) doctors applying for study/professional/duty leave & funding

The application process is open to individuals employed as substantive or fixed term consultants, locally employed doctors and Specialist Associate Specialist and Specialty (SAS) doctors and have responsibility for:

- Being aware of this policy and the procedures within it, and the potential consequences of non-compliance.
- Having a signed off job plan, are in mediation or appeal process or have engaged in the job plan process on the electronic job plan system (L2P).
- Ensuring they have an approved appraisal in the current appraisal year or can provide evidence that they have engaged or are engaging in achieving compliance.
- Declaring compliance with Private Practice Guidelines, in addition, they have completed the declaration of interest on Civica, the Trust's IT system, and if not, provide details explaining why this has not been completed.
- Ensuring their requirements for continued professional development (CPD) activities are fulfilled, including all Statutory & Essential training (SET) updates, SET+ and Role Specific Training (ReST) is required by professional bodies and by DBTH.
- Evidencing their SET compliance (90% or has future enrolments within 6 months of the application if required). This can be checked via the Electronic Staff Record (ESR) compliance portlet (topics under SET have the prefix CSTF except for level 4 resuscitation, which is identified separately).

- Accurate completion of all study/professional/duty leave, and funding applications submitted with a minimum of 6 weeks' notice.
- Arranging appropriate internal cover with colleagues.
- Ensuring that requests for study/ professional/duty leave are approved in accordance with this policy before making any bookings / travel arrangements.
- Ensuring that claims for appropriate expenses are made within 1 month of the end of the professional / study leave where possible but within a maximum period of 3 months.
- They do not have adverse outcomes following formal disciplinary actions by the employer, the General Medical Council (GMC) or the General Dental Council (GDC). Adverse outcomes include disciplinary sanctions, all findings by the GMC or the GDC of impaired fitness to practice due to misconduct, deficient professional performance or criminal conviction or caution.
- Payment to the course provider of any balance of fees where courses are part funded.
- In exceptional circumstances where an individual is unable to attend a study or professional development event, this should be discussed with the Clinical Director or Divisional Director and the course provider notified in advance of the study day wherever possible or as soon as reasonably practicable (including late attendance).
- Fully participating in the learning opportunity whilst demonstrating trust values and behaviours for both internal and external study.
- Providing feedback on the course and where appropriate share learning with colleagues as appropriate.
- All requests for study/professional/ duty leave and funding should be made with six weeks' notice.

## 4 APPLICATION PROCESS

Through a fair, consistent, and transparent application of this policy, equity of access to opportunities for the development of our people is applied. Creating an inclusive culture where everyone can thrive, whatever their background, is the responsibility of everyone in the Trust. All delegated clinical leads/authorisers must ensure that fair, consistent, transparent, and equitable treatment is applied to individual requests.

### 4.1 Eligibility to access study/professional/duty leave & funding

Eligibility will be agreed by the authoriser based on this policy and the individual's record of previous study/professional/duty leave.

#### **Study Leave:**

This includes study (this is generally on a course but not always), which usually attracts continuous professional development (CPD) points and may also include conferences and seminars or associated activities. This also includes private study leave, for example, taking leave to prepare for an exam. At the discretion of the authorised approver, up to 5 days private study leave can be approved, which will be taken from the 30 days over three years' allowance.

**Professional Leave:**

This includes research, teaching, examining, or taking examinations, and visiting clinics. Professional and study leave both come from the same allowance of 30 days over three years.

**Duty Leave:**

Medical colleagues may, with agreement from the Trust, take on official duties that impact on their timetabled activities within the organisation. Duty leave takes account of those activities that do not fall with Study and Professional Leave. Certain official duties may be included within the job plan, particularly when these are regular occurrences, for example Training Programme Director or attending Advisory Appointments Committees. *Where these are included within a job plan and timetabled, duty leave does not need to be applied for.*

Other activities will be accounted for within the flexible component of SPA allocation. Therefore, given the nature of some of these activities it may not be possible to schedule them without affecting other job planned and timetabled activities (e.g. direct clinical care). **Unless agreed otherwise with the Divisional Director or delegated other, the activities affected will be paid back at an agreed later date ('time-shifted')**. Although time off will be granted for Duty leave, in line with appropriate service cover, if you incur any expenses this will be self-funded or claimed from the organising body. Duty leave will be logged and approved in the same way as other types of leave described in this policy. The same timescales apply for application and approval.

The following activities (not exhaustive or exclusive) are regarded as official duties for which the duty leave application would normally be agreed, once other activity is confirmed as being time-shifted, as appropriate:

- Attendance at a Coroner's inquest or court if required by the Trust (time-shifted not required).
- Clinical meetings related to patient care that cannot be scheduled at another time, or meetings in connection with management of patients across Trust boundaries.
- Meetings with local commissioners.
- Local service, delivery, and improvement meetings.
- Specialist Network Meetings e.g., Cancer, Trauma, where you have a designated role.

Other activities may be agreed at the discretion of the Divisional Director or other authorised approver, for example:

- Delivering education as part of an agreed DBTH faculty that is essential to the delivery of the Trust Statutory Essential Training (SET) and Role Specific Training (ReST).
- Attendance at interviews for Doctors in Training.

Up to two days of discretionary duty leave may be granted per year.

## 4.2 Time off for study/professional/duty leave

This must be agreed within the application process and be approved by the authorised approver and be actioned by the rota co-ordinator. Where an educational activity requires attendance, time will be discussed and agreed with the individual applying and their clinical lead/authoriser. The amount of time supported will vary and will be recorded on the electronic application form. It should be noted that for taught modules (specifically over an academic year), time will only be supported during semester times and will be stopped over annual leave and during academic holidays unless this is a requirement of the course (where it will need documenting on the study/professional/duty leave application-see link below).

### [Application for Medical Study Leave](#)

#### **Guidance**

For all daily learning events including conferences study leave will be aligned to a 'normal' working day for the individual attending. A 'working day' is defined as a period of 2 Programmed Activities (PAs equating to 8 hours) and therefore any colleague whose normal working day is longer or shorter than 2 PAs will be required to book study or professional leave at a proportionate level. e.g., a working day of 10 hours will equate to 2.5 PAs. Locally Employed Doctors will be authorised equivalent time according to their contracted hours.

For any eLearning or distance learning educational activity this should be undertaken during contractual employment hours but can be flexible to meet service and individual need. This should be detailed in the application process and approved by the authoriser.

If the training requires the individual to commute, the time to do this will be discussed and agreed as part of the leave request.

## 4.3 Calculations of study/ professional leave

#### **Distribution and Allocation of Study/Professional Leave**

All study/professional leave is calculated over a three-year cycle from the date of appointment. The contractual allowance is 30 days over 3 years. In general terms, this should be split evenly resulting in 10 days per annum. If a colleague wishes to take more than 10 days within a single year, they will need authorisation from their authorised approver.

## 4.4 General Principles

Where a doctor is employed by more than one NHS organisation, the leave, and the purpose for which it is required must be approved by all the organisations concerned.

Where leave with pay is granted, should a medical colleague uptake remunerated work this is NOT considered as study or professional leave and needs prior discussion with their Divisional Director.

All requests for study/professional/ duty leave and funding should be made with six weeks' notice and must be submitted via the approved electronic platform with the appropriate type of leave identified. The leave approval process should be completed within the five working days' time limit. Requests made with less than six weeks' notice will only be granted by the approver or their nominee under exceptional circumstances. All study/professional leave applications must be concerning work undertaken within DBTH.

#### 4.5 Training Framework:

All training topics are determined at either a national, local, or organisation level therefore understanding the governance behind the topics we are expecting our people to complete and the order in which these should be classified is essential to avoid confusion. A training framework has been developed and agreed for use within DBTH and can be found [here](#).

## 5 FUNDING PROCESS & AVAILABILITY

DBTH has identified funding for medical staff study leave. This is from a variety of routes including local and national funding along with bespoke funding opportunities aligned to workforce priorities. This next section describes the different funding streams. All applications, regardless of the funding source, should be considered using the guidance identified within the scope of this policy. All requested costs MUST be agreed and signed off before commencement of study.

Any study that extends over one financial year (generally Higher Education Institute (HEI) academic programmes) will only be approved for one financial year at a time and funding cannot be guaranteed for subsequent years of study.

**An application via the approved electronic system must be completed for role development study (including internally delivered courses/study). It is essential that the time agreed to support the application is included in the application process and approved by the authoriser prior to study commencing. Applicants will be required to apply each financial year.**

#### 5.1 DBTH Medical Staff Study Leave Funding- Allowances & Expenses:

Each year DBTH provides significant funding to support our medical colleagues in accessing both domestic and overseas study and continued professional development. The trust also receives some national funding to support the professional development of our doctors to meet our educational contract requirements. This is to enable our people to apply for a wide range of professional development education. To access this funding the training requirements should where possible be identified at the individual's annual appraisal and be included in the divisional/departmental Learning Needs Analysis (LNA) to support prioritisation and funding allocation.

Funding requests for divisional authorisation for medical colleagues are capped at **£3000.00** per 3-year cycle with a limit of **£800.00** per individual trip for overseas study. The 3-year cycle aligns with the individuals leave year. In exceptional circumstances, additional funding may be approved where the study is vital to service delivery within the trust.

The funding for Study/Professional leave is based on the following: -

- Full reimbursement of approved course fees
- Accommodation
- Travel expenses reimbursed at the level of standard return rail fare or public transport mileage rate for car drivers

Where applicants prepay themselves, receipts must be produced with claim forms and submitted via EASY expenses system, the user guide can be viewed [here](#).

Travel expenses will only be considered for single/ time limited periods of study and will NOT be supported for annual academic courses available. Travel expense for the educational activity should be discussed and agreed locally (and reflected in the study leave application). Travel expenses of any kind can only be funded and authorised within the division/directorate by the delegated lead.

Other personal expenditure such as accommodation must be discussed and agreed with the individual applying and their clinical lead/delegated authoriser. The amount of support agreed will be recorded on the application form and will vary depending on the circumstances. Personal expenditure should be reclaimed via EASY expenses using the appropriate 'training' category. All Trust hotel bookings must now be made via Click Travel. Colleagues should no longer book accommodation using their own money and claim back via expenses, as bookings can be made directly through the platform without the need for personal payment or reimbursement.

**Reimbursement of approved expenses will be subject to staff adhering to the requirements detailed within the trust Employee Expenses & Subsistence Policy [CORP/EMP 33](#).**

## **5.2 Specialist, Associate Specialist and Specialty (SAS) doctors Professional Development Funding:**

Over the period 2021/22 to 2023/24, as part of implementing the new 2021 specialty doctor and specialist contracts, NHS England and NHS Improvement have allocated a small funding allowance to organisations to support the professional development of SAS doctors. This allocation of funding is based on the number of SAS doctors in each organisation. DBTH has access to this separate fund which is specifically aimed at supporting all doctors employed under SAS terms and conditions. These doctors will be eligible to apply for this funding to support their professional development.

The specific purpose of the funding is to invest in professional development activities for doctors under SAS terms and conditions, as specified below.

- The funding will be used to support specialty doctors and specialists, to enable them to deliver high-quality care for patients, to promote improvements in services, and to help create a collaborative, inclusive and learning-focused culture, and work environment.
- The funding can be used to supplement existing development funding available to specialty doctors and specialists (where this is deemed appropriate by the employer); or to fund activities that may not be covered by existing funding, but which represent likely benefits to SAS doctors and the organisation.
- The funding can be used to support both individual, and collective professional development activities, across a greater proportion of the SAS workforce including (but not limited to):
  - Supporting individuals undertaking a Certificate of Eligibility for Specialist Registration (CESR) or meeting portfolio development needs, such as undertaking a credential.
  - Leadership and management development (training and other learning opportunities).
  - Training in coaching, mentoring and mental health support, to support other members of the workforce.
- Creating and funding specific roles, such as for mentoring locally employed doctors.
- Funding SAS-specific bodies or events, such as establishing a regular SAS Forum or organising teambuilding events.
- The funding **cannot** be used to support the following activities:
  - Mandatory and statutory training courses that SAS doctors are already expected to complete.
  - Books, journals, library services, computer equipment and software.
  - Examination fees.
  - To meet the reasonable expenses associated with the period of approved study leave.

### 5.3 DBTH local training budgets:

Divisions and corporate directorates may have local training budgets for which they are responsible for managing. These budgets are available to support training and education and will be prioritised against role specific and role development provision. Funding attendance at a conference for example will be considered using these funds.

All requests for study/professional/duty leave & funding should be made by completing an application in the authorised electronic system alongside any specific conference, course specific application forms and/ or academic partner application forms. Only study leave that is approved via this process will be supported.

There may be occasions where payment is made from local training budgets which can then be reimbursed from the funding lead later. This is on a case-by-case basis and will be pre- agreed with the funding lead.

## 6 REPAYMENT OF COURSE FEES

All applicants should be aware that under certain circumstances the Trust may request part or full repayment of fees depending on the reasons for non-completion/leaving employment at DBTH.

Applicants are reminded that failure to attend a course (without prior agreement) or submit the required study attributes without discussing this with their clinical lead is a disciplinary offence and may prompt an investigation for fraud see [CORP/FIN 1 \(D\)](#).

“All staff are reminded that any abuse of study leave i.e., deliberately not attending or completing courses and working elsewhere during authorised study time may be considered fraudulent activity. In addition, any claims for expenses or course funding associated with such activity may be recovered by the Trust from the applicant. Any concerns of this nature may result in disciplinary action and will be referred to the Local Counter Fraud Specialist (LCFS) in accordance with the Fraud, Bribery and Corruption Policy & Response Plan (CORP/FIN 1 (D)).”

## 7 PAYMENT OF RESUBMISSION OR EXAMINATION

It is the individual’s responsibility to discuss the payment for a resubmission or examination re-sit with their clinical lead/authoriser to determine whether the individual or DBTH local training budgets can be used. DBTH funding for resits/resubmissions should be by exception. This can only be determined on an individual case by case basis, but it would be best practice that the individual had notified the training provider, clinical lead/authoriser prior to the above requirement e.g., extension request.

## 8 APPEAL PROCESS

Where an applicant feels they have been unfairly treated in any aspect covered by this policy in relation to their application for study/professional/duty leave/funding, they should in the first instance raise this with their immediate clinical lead/authoriser to try and resolve the matter informally. If this cannot be achieved, the matter should be escalated to the Divisional Director who may need to consult with the Associate Director of Education for further consideration and arbitration in relation to educational matters. All colleagues exercise the right of appeal through the Trust’s Grievance Procedure [CORP/EMP 2](#), however, it is hoped that local agreement can be reached.

## 9 LEARNING/SUPPORT

For support in the use and application of this policy, please contact your divisional or corporate Education Lead.

## 10 MONITORING COMPLIANCE WITH THE PROCEDURAL DOCUMENT

An annual report of the spend of medical staff study will be presented to the People Committee in line with all other spend at DBTH. This report will include analysis of applying the policy to a fair, transparent, and consistent approach.

Additionally, Divisions will be asked to annually provide oversight of study leave spend from their local budgets.

## 11 EQUALITY IMPACT ASSESSMENT

The Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population, and workforce, ensuring that none are disadvantaged over others. Our objectives and responsibilities relating to equality and diversity are outlined within our equality schemes. When considering the needs and assessing the impact of a procedural document any discriminatory factors must be identified.

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27), the Equality Diversity and Inclusion Policy (CORP/EMP 59) and the Civility, Respect and Resolution Policy (CORP/EMP 58).

The purpose of the EIA is to minimise and if possible, remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation, or religious belief. No detriment was identified. (See Appendix 1)

## 12 ASSOCIATED TRUST PROCEDURAL DOCUMENTS

CORP/EMP 3 - Grievance and Dispute Procedure (including Staff Copy)

CORP/EMP 27 - Equality Analysis Policy

CORP/EMP 33 - Employee Expenses and Subsistence Policy

CORP EMP 38 - Appraisal Policy for Medical Staff of Doncaster and Bassetlaw Teaching Hospitals as Designated Body Policy

CORP/EMP 48 - Flexible Working Policy

CORP/EMP 58 - Civility, Respect and Resolution Policy

CORP/EMP 59 - Equality Diversity and Inclusion Policy

CORP EMP 66 - Mandatory Learning Policy

CORP/FIN 1(D) - Fraud, Bribery and Corruption Policy & Response Plan

## 13 DATA PROTECTION

Any personal data processing associated with this policy will be carried out under 'Current data protection legislation' as in the Data Protection Act 2018 and the UK General Data Protection

Regulation (GDPR) 2021. This responsibility lies with all colleagues involved in the application and approval process.

Training records pertaining to educational activity will be recorded on the Oracle Learning Management (OLM) system and link to the Electronic Staff Record (ESR) where functionality allows.

For further information on data processing carried out by the trust, please refer to our Privacy Notices and other information which you can find on the trust website: <https://www.dbth.nhs.uk/about-us/our-publications/information-governance/>

## 14 REFERENCES

2003 Consultants Terms and Conditions of Service

<https://www.nhsemployers.org/system/files/2023-01/Consutants-terms-and-conditions-version-13-January-23.pdf> last accessed online 5.6.2023

2008 Specialty and Associate Specialist Terms and Conditions of Service

<https://www.nhsemployers.org/articles/old-terms-and-conditions-service-medical-and-dental-staff> last accessed online 5.6.2023

2021 Specialty Doctor Terms and Conditions of Service

<https://www.nhsemployers.org/publications/terms-and-conditions-service-specialty-doctors-england-2021> last accessed online 5.6.2023

2021 Specialist Terms and Conditions of Service

<https://www.nhsemployers.org/publications/terms-and-conditions-service-specialist-grade-england-2021> last accessed online 5.6.2023

General Medical Council (2024) Good Medical Practice <https://www.gmc-uk.org/-/media/documents/good-medical-practice-2024---english-102607294.pdf>

last accessed online 2.5.2024

Health Education England (HEE) Study Leave (2022)

<https://www.hee.nhs.uk/sites/default/files/documents/Health%20Education%20England%20%28HEE%29%20Study%20Leave%20-%20An%20overview%20of%20the%20HEE-wide%20approach.pdf> last accessed online 16.3.23

NHS People Promise (2022); <https://www.england.nhs.uk/ournhspeople/online-version/lfaop/our-nhs-people-promise/>

last accessed online 16.3.23

## 15 DBTH STRATEGIES/Frameworks

[DBTH People Strategy](#)

[DBTH Vision & Values](#)

[DBTH Training Framework](#)

## APPENDIX 1 - EQUALITY IMPACT ASSESSMENT PART 1 INITIAL SCREENING

Policy	Directorate	Assessor (s)	New or Existing Service or Policy?	Date of Assessment
CORP/EMP 67 v.1	Education & Research	Lisette Caygill	New	March 2026
<b>1) Who is responsible for this policy?</b> Name of Division/Directorate: Education & Research				
<b>2) Describe the purpose of the service / function / policy / project/ strategy?</b> Who is it intended to benefit? What are the intended outcomes? Fair 7 transparent policy to support applications for study leave & funding				
<b>3) Are there any associated objectives?</b> Legislation, targets national expectation, standards: Financial management, people development (People Plan & People Strategy)				
<b>4) What factors contribute or detract from achieving intended outcomes?</b> – fair treatment for all, clear inclusion and direction for allocation of resources. Individual needs may be met as per policy.				
<b>5) Does the policy have an impact in terms of age, race, disability, gender, gender reassignment, sexual orientation, marriage/civil partnership, maternity/pregnancy and religion/belief?</b> Details: [see Equality Impact Assessment Guidance] - No				
<ul style="list-style-type: none"> <li>• If yes, please describe current or planned activities to address the impact [e.g. Monitoring, consultation] –</li> </ul>				
<b>6) Is there any scope for new measures which would promote equality?</b> [any actions to be taken] Meets standards				
<b>7) Are any of the following groups adversely affected by the policy?</b>				
<b>Protected Characteristics</b>	<b>Affected?</b>	<b>Impact</b>		
a) Age	No			
b) Disability	No			
c) Gender	No			
d) Gender Reassignment	No			
e) Marriage/Civil Partnership	No			
f) Maternity/Pregnancy	No			
g) Race	No			
h) Religion/Belief	No			
i) Sexual Orientation	No			
<b>8) Provide the Equality Rating of the service / function /policy / project / strategy – tick (✓) outcome box</b>				
<b>Outcome 1 ✓</b>	<b>Outcome 2</b>	<b>Outcome 3</b>	<b>Outcome 4</b>	
*If you have rated the policy as having an outcome of 2, 3 or 4, it is necessary to carry out a detailed assessment and complete a <b>Detailed Equality Analysis form</b> – see <b>CORP/EMP 27</b> .				
<b>Date for next review:</b> October 2028 (Policy valid until April 2029)				
<b>Checked by:</b> Julie Butler		<b>Date:</b> March 2026		