

**NHS Greater Glasgow & Clyde**

*Medical Staff Leave*

*Management Guidelines*

Issue Date: April 2005

## Review Date: December 2005

Updated: June 2017

**NHS Greater Glasgow & Clyde**

**Medical Staff Leave - Application and Approval Guidelines**

1. **INTRODUCTION**

The guidelines apply to Consultants, Associate Specialists, Specialty Doctors, Staff Grade Doctors, Clinical Assistants, Hospital Practitioners and salaried General Practitioners. The arrangements also apply to Honorary Contract Holders. The guidelines are intended to clarify entitlement to leave and the process by which staff make application to take periods of leave.

Categories of Absence include:

* Annual Leave
* Study Leave – European and outwith Europe
* Sickness Absence
* Parental Leave
* Other forms of absence which adversely impact on Direct Clinical Care

**2. APPROVAL**

All periods of annual leave, study leave and parental leave requested by medical staff are subject to prior approval by the Clinical Director/Lead Clinician/other Consultant with formal management role or Clinical Services Manager (HSCPS). In the absence of the Clinical Director/Lead Consultant/other Consultant with formal management role or Clinical Services Manager (HSCPS), a deputy nominated by the Clinical Director will be responsible for considering leave requests.

All periods of leave requested by Clinical Directors are subject to agreement of the

Chief of Medicine/General Manager/Clinical Services Manager (HSCPS); or in their absence the Medical Director.

In the case of Chiefs of Medicine or equivalent, the approval of the Medical Director/Director should be sought.

**3. RECORDING**

Details of leave will be recorded at directorate/partnership level.

1. **ANNUAL LEAVE**
   1. Annual leave requests should be submitted using the attached request form, to the

Clinical Director/Lead Consultant/other Consultant with formal management role or

Clinical Services Manager (HSCPS), **six weeks** in advance of the date of the leave

request.

* 1. Leave will be granted subject to approved arrangements having been made to ensure

continuity of essential services.

**5. STUDY LEAVE**

**5.1 Study Leave General**

* Entitlement to study leave is available to all staff, irrespective of sex, race, ethnic origin or age in accordance with NHS Greater Glasgow and Clyde’s Equal Opportunities Policy.
* Holders of Honorary Contracts are entitled to study leave and funding, if the nature of the leave is wholly related to their NHS activities.
* Where an Honorary Contract holder is proposing to undertake study leave associated with University or non-NHS commitments, the period of leave must still be agreed by the Clinical Director/Lead Consultant/other Consultant with formal management role or Clinical Services Manager (HSCPS).
* NHS Greater Glasgow and Clyde recognises the nationally recommended standard of 30 days study leave in any period of 3 years.
  1. **Study Leave Application Guidelines**
* European study leave is subject to the agreement of the Clinical Director/Lead Consultant/other Consultant with formal management role or Clinical Services Manager (HSCPS); while study leave outwith Europe is subject to the agreement of the Clinical Director/Lead Consultant/Consultant with formal management role or Clinical Services Manager (HSCPS) **and** the Chief of Medicine or General Manager or equivalent from the Directorate/Partnership.
* Study leave requests should be submitted using the attached request form to the Clinical Director/Lead Consultant/other Consultant with formal management role or Clinical Services Manager (HSCPS), **six weeks** in advance of the date of the leave request.
* The Clinical Director/Lead Consultant/other Consultant with formal management role or Clinical Services Manager (HSCPS) should respond to study leave applications within **two weeks** of receipt of the request.
* The total costs to be incurred during the study leave period should be clearly stated on the study leave application. In circumstances where leave is taken within the U.K it will be granted with full reimbursement of associated expenses. Where leave is taken elsewhere within the European Union, it will be granted with reimbursement of associated expenses at a level agreed between the individual and medical management, which will normally be comparable with the level of expenses available for study leave within the U.K. It is at the discretion of medical management to grant professional or study leave outside the European Union with or without pay and expenses, or with any proportion thereof.
* A Study Leave Expenses Form should be completed and forwarded to the Clinical Director/Lead Consultant/other Consultant with formal management role or Clinical Services Manager (HSCPS), for authorisation, normally within **two months** of returning from the period of leave. The Expenses Form will be countersigned by the Clinical Director/Lead Consultant/other Consultant with formal management role or Clinical Services Manager (HSCPS) and forwarded to Finance for payment.
* Any claim for expenses in excess of the amount authorised on the application form requires the approval of the Clinical Director/Clinical Services Manager (HSCPS) or equivalent.

**6. OTHER FORMS OF ABSENCE WHICH ADVERSELY IMPACT ON**

**DIRECT CLINICAL CARE.**

This section includes absences (other than sick leave) which will result in the cancellation of a programmed activity such as an out-patient clinic, an elective theatre list, an endoscopy session or a bronchoscopy session.

Such absences are subject to the prior approval of the Clinical Director/Lead Consultant/ other Consultant with formal management role or Clinical Services Manager (HSCPS). Applications for these categories of leave should follow the same procedures outlined above, under Section 4 - Annual Leave

**7.** **SICKNESS ABSENCE**

All staff employed by NHS Greater Glasgow and Clyde should observe sickness absence notification guidelines.

* Notification to Directorate/Partnership on first day of absence or prior to this date where possible, e.g. hospital admission for elective procedure.
* Completion of a self-certificate form for absences of 4 - 7 days (inclusive).
* Submission of a medical certificate for absences of 8 days or more.

**8. PARENTAL LEAVE**

Paid Parental Leave was introduced from 1st October 2006. Full details can be found on HR Connect

<http://www.nhsggc.org.uk/working-with-us/hr-connect/policies-and-staff-governance/policies/parental-leave/>

**9.** **DOCUMENTATION**

Copies of forms are available from HR Connect.

**NHS GREATER GLASGOW & CLYDE**

**MEDICAL STAFF LEAVE NOTIFICATION**

**REQUEST FORM**

**PLEASE COMPLETE USING BLOCK CAPITALS**

**PERSONAL DETAILS:**

Surname: Forename (s):

Designation: Department:

Contact Telephone No: Payroll No.:

Signature: Date of Application:

**TYPE OF LEAVE REQUESTED:**

Annual Leave □ Special Leave (e.g. compassionate □

leave, public services duties etc.)

Study Leave (within Europe) □ Maternity/Paternity Leave\* □

Study Leave (outwith Europe) □ Parental Leave\* □

Professional Leave# □ Professional Association □

(e.g. Royal College duties, Leave (e.g. Facilities Time)

National Panelist etc)

Other Leave □

*(please state below* )

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\* *Please complete Maternity/Paternity/Parental Leave application form in addition to this leave request form.*

# *Please attach a copy of Agenda/other supporting evidence*

**DATES OF LEAVE REQUESTED:**

From: To: No. of days:

Please provide details of Direct Clinical Care (DCC) sessions to be relinquished:-

DCC Duty e.g. clinic/elective theatre list: Date:

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**FOR STUDY LEAVE PURPOSES ONLY:**

Course Title: ……………………………………………… Course Organiser: ………………………………………………

Course Venue: ……………………………………………. Course Date: ……………………………………………………….

Course Fees: ………………………………………………. Travel Costs: ……………………………………………………..

Funding Requested: Yes/No Total Claim

i.e. amount of funding requested: ………………………

Please provide details of financing body e.g. department, endowment fund, outside body, self financed, honorarium etc:-

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*\* Please attach a copy of the Course Programme and Expenses form*

**AUTHORISATION:**

□ I approve the request for leave on this occasion.

□ I do not approve the request for leave on this occasion. The reason(s) for not supporting this request is as follows:

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Surname: …………………………………………………………… Forename: ………………………………………………

Signature: ………………………………………………………… Date: ………………………………………………………

Designation: …………………………………………………………………………………………….

*\* Please return signed original copy to applicant and forward a copy to the Directorate/Partnership HR Team*

**APPROVAL BY:**

**Annual/European Study/Parental Leave** – is subject to prior approval by the Clinical Director/Lead Clinician/Other Consultant with formal management role/Clinical Services Manager (CHCP).

**Study Leave outwith Europe** – is subject to prior approval by the Clinical Director/Lead Clinician/Other Consultant with formal management role **plus** Associate Medical Director/General Manager or equivalent from the Directorate/Partnership.

All periods of leave requested by Clinical Directors are subject to agreement of the Chief of Medicine /General Manager or equivalent; or in their absence the Medical Director/Director. In the case of Associate Medical Directors or equivalent, the approval of the Medical Director/Director should be sought.