CONSULTANT SABBATICAL LEAVE POLICY

APPLICATION AND APPROVAL GUIDLINES

1. INTRODUCTION

Sabbatical Leave has been introduced as part of the New Consultant Contract for NHS Scotland. NHS Greater Glasgow & Clyde (NHSGG&C) is committed to supporting Consultant staff with a policy for Sabbatical Leave as the organisation recognises clear benefits for both the individual and the service in the application of such a policy. The purpose of this document is to provide guidelines for Sabbatical Leave, including application and approval guidelines.

2. ELIGIBILITY

2.1 In applying for Sabbatical Leave, the Consultant should demonstrate that the purpose of the leave is to pursue a project that is in the interests of NHSGG&C and contributes to his/her continuing professional, clinical or leadership development.

2.2 There are 2 options available to a Consultant applying for Sabbatical Leave:

- After 7 years service in the Consultant grade, a Consultant will be eligible to apply for one period of Sabbatical Leave of up to 6 weeks.

or

- After 10 years service in the Consultant grade, a Consultant will be eligible to apply for up to 3 months Sabbatical Leave.

If either of these options is granted with pay, no further period of paid Sabbatical Leave will be granted until retirement.

2.3 Sabbatical Leave may be granted without pay in circumstances other than those set out in 2.1 above at the discretion of NHSGG&C. This could be for example, working in a different hospital, or a secondment where payment is made by a third party.

2.4 The paid period of 6 weeks/3 months may be extended by a further unpaid period at the discretion of NHSGG&C. This extension would not normally exceed 3 months. When making the request the Consultant should demonstrate how Para 2.1 continues to apply.

2.5 When Sabbatical Leave has been granted without pay, NHSGG&C will only in exceptional circumstances grant further periods of Sabbatical Leave. No
consideration will be given unless a minimum of 7 years has elapsed since
the first period.

2.6  As the purpose of the Sabbatical Leave is to contribute to professional,
clinical or leadership development, it would not normally be expected to
receive an application from a Consultant who is within 2 years of retirement.

2.7  All employment rights will be preserved during paid periods of Sabbatical
Leave. Extension to that period will be subject to individual discussion
about the impact of employment rights depending on the length of the
extension.

3.  APPLICATION & APPROVAL

3.1  A Consultant should apply, using Appendix 1, to the Associate Medical
Director of the Directorate, Medical Director of Mental Health Partnership
or Clinical Director of CHSCP/CHP and have the written support of his/her
Clinical Director.

3.2  The application should be submitted a minimum of 6 months prior to the
intended date of leave to be taken.

3.3  Where an application for Sabbatical Leave has been rejected, a period of 12
months must elapse before a further application can be made.

3.4  A stated case must be submitted as part of the application specifying: -
  ➢  how the leave will be used;
  ➢  how the leave will benefit the NHS;
  ➢  how the leave will benefit the applicant. A full programme
    or itinerary must be attached with the application;
  ➢  what arrangements will be made to cover the applicant
during the leave;
  ➢  how the applicant will inform the department, service
    and NHSGG&C of the educational, training and experiential
gains of the sabbatical period
  ➢  what travel and accommodation expenses the applicant expects
to be incurred. NHSGG&C has discretion to meet these in part or
in full (the total amount of the expenses agreed will be the
responsibility of the applicant and will be claimed back in the
normal way);
  ➢  if it is anticipated that payment will be made to the applicant
by a third party during the sabbatical, this should be detailed.

3.5  The application form is attached as Appendix 1. Once received by the
NHSGG&C Associate Medical Director, a decision will be made within 20
working days and the applicant duly notified. The Associate Medical
Director, in considering applications
for Sabbatical Leave, will satisfy him/herself that:
  ➢  The patient care and teaching responsibilities of the department
can be satisfactorily maintained during the absence of the applicant;
The objectives of the proposed programme are justified in terms of the expected professional benefit to the Consultant and NHSGG&C;

The proposed length of absence is justified by the requirements of the programme.

No booking of air fares etc should be made until approval by the Associate Medical Director is received.

3.6 If the leave is rejected, the applicant will be informed in writing of the reasons for the decision.

As with other Policies, individuals will have a right to use the organisation’s Grievance and Disputes Procedures.

3.7 Where final approval has been granted for a Sabbatical Leave application, the applicant must proceed to undertake the Sabbatical Leave programme within twelve months of the final approval date. Where the Sabbatical Leave is not taken within this twelve month timeframe, approval will be deemed to have lapsed, and a new leave application will be required to be submitted to the Associate Medical Director.

4. **COMMUNICATION/RETURN TO WORK**

4.1 Arrangements can be made to direct relevant mail/e-mail and other information to the applicant during periods of Sabbatical Leave. This would be arranged via the local Manager for the service involved.

4.2 If an extension to the sabbatical period is requested, this must be made at least one month prior to the original sabbatical period ending to allow appropriate cover arrangements to be maintained/agreed.

4.3 NHSGG&C will consult with the applicant if, at any time during the course of the Sabbatical Leave, organisational changes occur which have implications for their post.

4.4 A written report would be expected within 2 months of the sabbatical period ending and arrangements put in place to inform the department, service and NHSGG&C of the educational, training and experiential gains of the sabbatical period.
CONSULTANT SABBATICAL LEAVE APPLICATION

APPLICANT DETAILS

Name……………………………………………………….. Pay No. ……………………………

Specialty ………………………………………………….

Sabbatical Leave requested From: …………………………………………….

To: ………………………………………………….

No. of Years’ Service in Consultant Grade ……………

STATED CASE

1. I intend to use the Sabbatical Leave period for the following purpose:

2. The Leave will benefit NHSGG&C in the following way(s):
3. The Leave will benefit me in the following way(s):

A proposed timetable/itinerary must be attached.

4. My post will be covered in the following way during my Sabbatical Leave:

5. A written report will be provided within 2 months of my return. In addition I expect my sabbatical period may lead to

(a) publication in a peer reviewed journal

(b) oral presentation at a national or international meeting

(c) oral presentation(s) in my department

6. I anticipate the following travel and accommodation expenses:

   Are expenses requested   Y/N
Travel: ……………………………………………………………………………………………
……………………………………………………………………………………………….
……………………………………………………………………………………………….
Subsistence: ………………………………………………………………………………
……………………………………………………………………………………………….
……………………………………………………………………………………………….
Accommodation: ……………………………………………………………………………
……………………………………………………………………………………………….
……………………………………………………………………………………………….
All receipts will be required.

7. I will receive payment from a third party, namely ………………………………………
   for carrying out……………………………during this period of Sabbatical Leave.
   
   All payments to be received i.e. accommodation, honoraria or salary should be detailed
   below:
   ………………………………………………………………………………………………
   ……………………………………………………………………………………………….
   ……………………………………………………………………………………………….

8. Written support of the Clinical Director attached Y/N
REQUEST

Applicant’s Signature……………………………………………………………………

Date ………………………………………

I recommend this period of Sabbatical Leave and all cover arrangements are satisfactory.

Clinical Director Signature ……………………………………………………………

Date……………………………………………………

ASSOCIATE MEDICAL DIRECTOR

I approve/do not approve * the Sabbatical Leave period.

* For the following reasons:

I authorise the following sum for travel and expenses £………………

Associate Medical Director Signature ……………………………………………

Date……………………………………………………
The attached Consultant Sabbatical Leave Policy has been consulted with and communicated to the members of the Medical Staff Forum.

The guidelines contained herein are agreed and therefore represent the policy of NHS Greater Glasgow & Clyde.

Ian Reid
Joint Chair - MSF

John Anderson
Joint Chair - MSF

Brian Cowan
Medical Director - NHSGG& C

Anne Cruickshank
On behalf of the LNC

Date Effective: 1 July, 2006

Review Date: July 2008