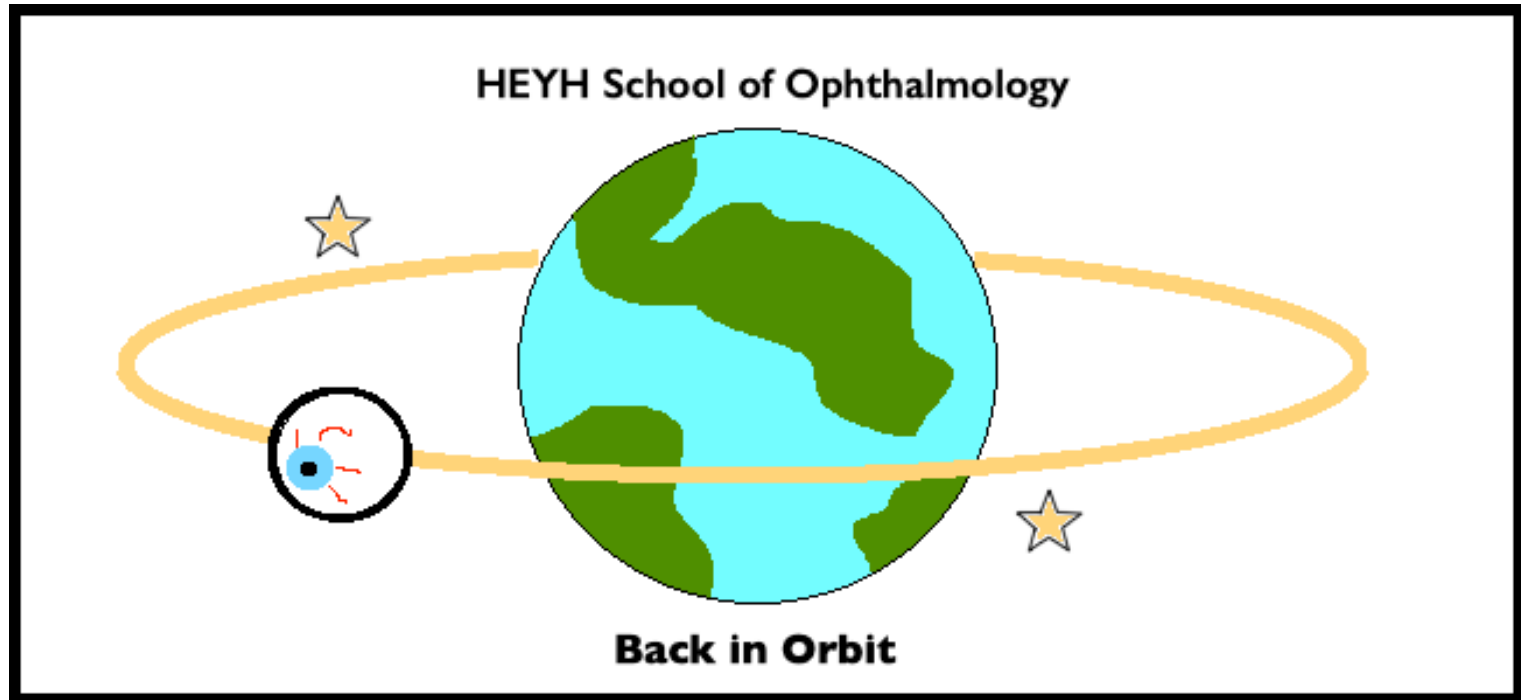


RETURNING TO PRACTICE AFTER TIME OUT OF OPHTHALMOLOGY TRAINING

A step-by-step guide

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INTRODUCTION

- Commonest reasons for time out of training:
 - Parental leave
 - OOP: research, experience, training, career break
 - Sick leave
- Evidence: Impact of time out of training of > 3 months duration
 - In a recent survey of 18 current and former Yorkshire ophthalmology trainees who had experience of returning time out of training, we learnt that time out has a significant impact on skills and confidence, regardless of OST stage.
 - The impact is greatest on trainees taking time out for parental leave, which disproportionately affects women, but all trainees, regardless of reason for time out, agreed that additional support on returning would be beneficial.
 - There is a clear need for a structured return-to-work programme that is specific to Ophthalmology, building on the existing SuppoRTT programme available at HEYH.

HOW CAN YOU ORGANISE AN EFFECTIVE RETURN TO WORK EXPERIENCE?

BEFORE GOING OFF

Meet with your ES and/or CS

- Document your anticipated concerns, action plan – Portfolio PDP section
- Make use of SuppoRTT
- SuppoRTT Pre-Absence [Form](#) to be completed with ES – upload copy to portfolio
 - Inform Deanery SuppoRTT team
- Update TPD

TIP:

Keep a record of all email correspondence about your return plans as things can get forgotten when you are away for a long time

WHILE AWAY

If taking parental leave:

- Look into [Keep-in-Touch \(KiT\) days](#) and learn about the local process in your Trust – liaise with HR, payroll and your clinic managers and let them know of your intention to use these
- KIT days (10 max) can be used for theatre, supernumerary clinics, as well as study days such as simulation days – look out for local courses e.g. trauma or subspecialty skills courses running during your time out.

Other types of TOOT, e.g. OOP:

- Keep logbook up-to-date if participating in any surgery
- Keep a record of any clinical sessions you have attended
- Consider whether locum emergency work is an option e.g. if financial need or relevant to your OOP/skills upkeep

BEFORE RETURNING

(3 months prior to return date)

Reconnect with educational supervisor, clinical supervisors, +/- College Tutor, TPD

- Remote meeting with ES/College Tutor to discuss and plan adaptation period and timetable
- Contact [Simulation Lead](#) to organise wet-lab dates
- Contact HR and clinic managers confirming return date and discussing timetable needs (allow 2 months minimum to get things organised)
- Contact Occupational Health if relevant
- Arrange to join SuppoRTT generic courses (RTTA, see website)
- Peer support: Connect with other returning trainees in your specialty, and speak to trainees who have experienced this before

WHAT IS AN ADAPTATION PERIOD?

- A period of agreed protected time when you initially return to practice, during which you engage in those areas that you feel most necessary to bring your skills back up to baseline, with appropriate supervision.
- Recommended duration: **4 weeks** (range 1-6 weeks: discuss with ES). Will depend on:
 - Reason for TOOT, e.g. Specialty OOP with a clinical theme may mean fewer supervised sessions required upon return, whereas non-clinical leave e.g. parental/sick leave or OOPC may require more and for longer
 - Duration of TOOT
 - LTFT versus full-time WTE status
 - How you feel about your own skills and confidence
- **Individualise** to cover the skills you need most

OPHTHALMOLOGY PROTECTED ADAPTATION PERIOD CHECKLIST: COMPONENTS TO CONSIDER INCLUDING

- Supervised eye-casualty
 - Supernumerary session
 - With consultant present
 - Not in charge of supervising juniors
- Buddied on-calls
 - Pair up with another on-call trainee of same level to shadow you for first 2-4 on-calls - will require department to arrange locum pay for shadowing trainee
- Theatre
 - Phaco: Aim 1-2 lists per week (especially in larger units where you are likely to share with another already rostered trainee)
 - Subspecialty list (senior trainees/TSC)
- Protected wet lab and simulation sessions (i.e. cannot be pulled out of these for service cover)
 - Consider practising phaco including complications management – anterior vitrectomy, suturing
 - Consider practising any emergency skills e.g. trauma, vitreous sampling
 - Practise subspecialty skills (senior trainees e.g. returning to TSC) – try and get a trainer to join you (sometimes a challenge!)
 - The Simulation team has SupportTT funding for this
- Subspecialty clinics
 - Especially if on TSC – Phase in, supernumerary for first 4 weeks following return

EXAMPLE OPHTHALMOLOGY RETURN TO WORK TIMETABLE TEMPLATES

Full time, per week (x4 weeks)

- 2 x supervised cataract theatre
- 2 x supervised supernumerary eye casualty
- 2 x RSTA same day – can spend on simulation day (protected). Will allow travel time e.g. to Hull wet-lab
- 2 x supernumerary subspecialty clinic (or general/cataract clinic for junior trainees)
- 1 x regional teaching
- 1 x supervised laser list or specialty list e.g ROP round/IVT

- ✓ Once agreed, ES/CT to disseminate plan to CS's, TPD and relevant clinic management team
- ✓ Complete HEYH SuppoRTT online [form](#) in advance of return date
- ✓ Trainee to update PDP in e-portfolio (or upload form to portfolio)

LTFT e.g. 60% (x 6 weeks)

Odd week

- 2 x supervised cataract theatre
- 1 x supervised supernumerary eye casualty
- 1 x regional teaching with RSTA same day – to allow travel to simulation lab
- 1 x supernumerary subspecialty clinic
- 1 x additional supernumerary supervised clinic or laser or specialty list e.g. ROP round/IVT

Even week

- 2 x supervised supernumerary eye casualty
- 1 x supervised cataract theatre
- 1 x regional teaching with RSTA same day – to allow travel to simulation lab
- 1 x supernumerary subspecialty clinic
- 1 x additional supernumerary supervised clinic or laser or specialty list e.g. ROP round/IVT

These are example timetables and not prescriptive – you will need to negotiate, with ES support, what can feasibly address your individual needs in your department

ES CHECKLIST FOR OPHTHALMOLOGY: ADAPTED FROM RCOA RETURNING TO WORK AFTER A PERIOD OF ABSENCE (2015)

- How long has the doctor been away?
- What was their level of expertise before going off?
- Returning FT or LTFT?
 - If LTFT, expect confidence and competence levels to take slightly longer to return to previous levels.
- Are they returning to the same post/departement?
- If you are the new ES, have you received a handover from their previous ES? ES report and portfolio reviewed?
- If returning from parental leave: Have they accessed any KIT days? How were these spent?
- Has the doctor undertaken any clinical or educational activity during time out (esp if OOPT/OOPR/OOPE):
 - Simulation training
 - Knowledge refresher courses
 - Clinic sessions
 - Theatre sessions
 - Emergency work – locum on-calls/eye casualty
- Are there any health issues, and if so has Occupational Health advice been sought?
 - Any additional workplace adjustments needed?
- Have any new policies, operating procedures or equipment changes been introduced during their period of absence?
Especially important if rejoining at a time when there is no planned group induction session (i.e. not February or August)
 - New imaging modalities, new local forms, new IT systems – check has up to date training and access rights
 - Any site relocation? E.g. new theatre, new clinic site, new out-of-hours work site
 - Updates about where things are: door/cupboard access codes for out-of-hours, lasers, drugs cupboards,

➤ [Download checklist](#)

➤ [Download timetable planning document](#)

REVIEW YOUR PROGRESS

- Towards the end of the adaptation period, arrange review meeting between trainee and ES
- Identify if any additional support is needed, or sign-off as ready for standard work-pattern.
- ES to disseminate any remaining requirements to all relevant parties
- Trainee to record in portfolio PDP
- Use HEYH SuppoRTT online [form](#) to record meeting.

HEYH SUPPORTT USEFUL LINKS

- Main page: https://www.yorksandhumberdeanery.nhs.uk/learner_support/supported_return_to_training
- Contact: supportt.yh@hee.nhs.uk
- Pre-absence flowchart: https://www.yorksandhumberdeanery.nhs.uk/sites/default/files/supportt_flowchart-_pre-absence_.pdf
- Pre-absence online form: <https://healtheducationyh.onlinesurveys.ac.uk/supportt-pre-absence-form-yorkshire-humber>
- Initial return flowchart: https://www.yorksandhumberdeanery.nhs.uk/sites/default/files/supportt_flowchart-_initial_review_meeting.pdf
- Initial return online form: <https://healtheducationyh.onlinesurveys.ac.uk/supportt-initial-return-meeting-form-yorkshire-humber>