

The National IDT trainee feedback survey report – August 2015

In each transfer window, the National IDT team collects feedback from trainees who have recently applied in order to ensure that we are providing a service that is user-focussed. Results are published in order to remain transparent and to demonstrate our commitment to making changes that will benefit trainees applying for an IDT.

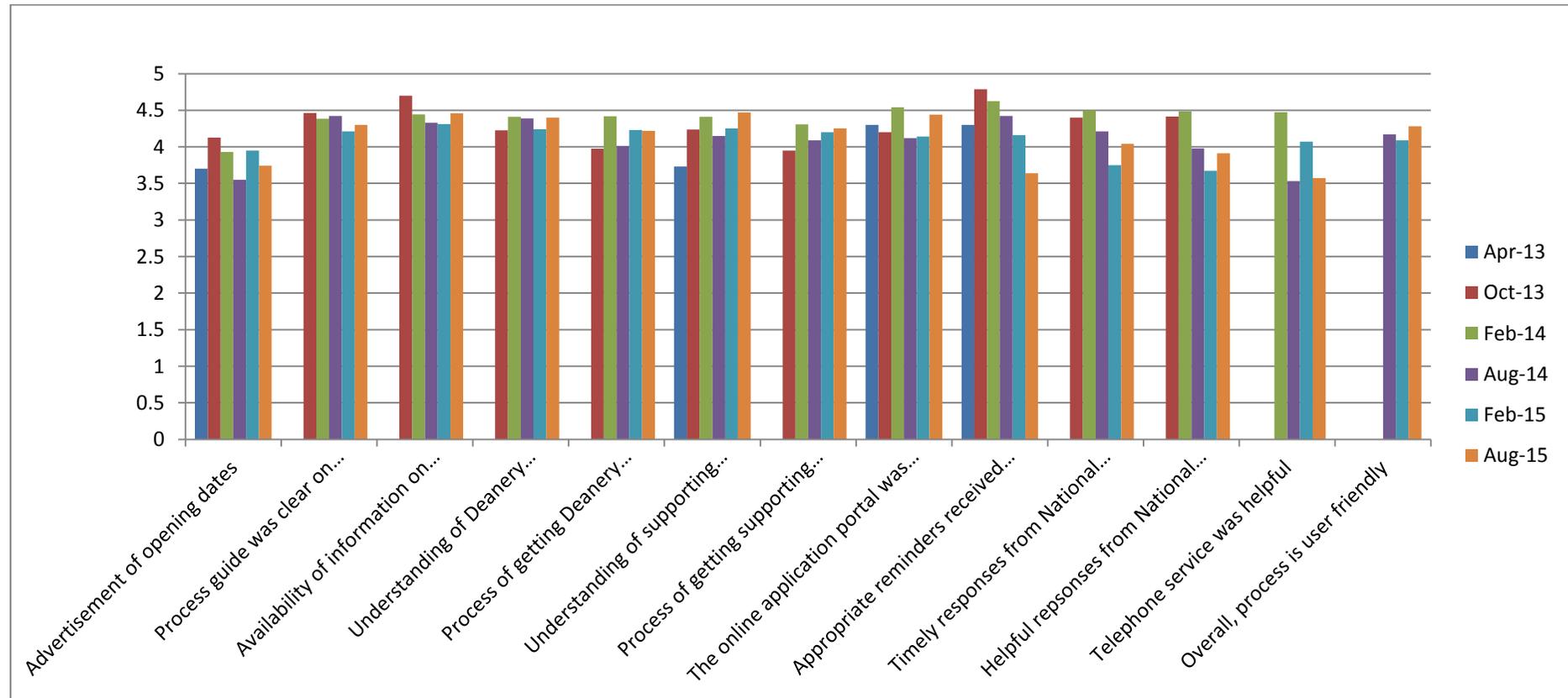


Figure 1. Comparison Graph for feedback survey - August 2015

IT

Finding the page where you can actually apply from could be made more simple. The only way I could find it involved going through 2 pages to get to the apply here button. It was also difficult to find the supporting forms on the IDT website. A drop down box with these in would be helpful.

We have tried to make this as clear as possible – you have to go to the front page of our website on the left there is a blue box with all the IDT pages listed. We have made the page name clearer ('Apply Here for IDT') but will not put the 'apply here' button on the home page as we feel information about the process is more suitable and accessible here.

Each of the supporting documents is available 4 weeks prior to a window opening and are on a page marked 'Supporting Documents'. Each document can be downloaded by clicking the very large button with the appropriate document name on it.

I raise this every time; The process strongly relies on access to scanning equipment for both the application and the program director. This is discriminatory and could be helped by allowing digital signatures. Please review this part of the process.

We feel that scanning documents is the most efficient and safe way to upload the information we ask for. If you do not have access to a scanner, there are some alternatives. We accept photos of forms which you can easily take with your phone (as long as they are clear). There are also some apps which will scan a document for you. You can also post the forms to us so we can consider them with your online application.

Regarding the signature, we do accept electronic signatures where these are digital representations of an actual signature. I hope you can understand for reasons of verification why we would not simply accept a typed name.

Application

The eligibility criteria could be more specific. Maybe some case examples or something.

We are currently working on getting some more scenarios published on the BMA website, where you can already find some case examples for national IDT. <http://bma.org.uk/developing-your-career/specialty-training/inter-deanery-transfers>

When we have completed this project we will link to the BMA on our website.

I wanted to apply to transfer between windows when my wife got a new job and we had to move away with my child just after the last transfer window closed. However whilst it is stated transfers can occur in exceptional circumstances, no one knows what these are. This stupidly rigid system will therefore deprive a deanery of a high trainee in emergency medicine (hot commodity) because I have been forced to take an OOPC awaiting a window to open so i can apply and then transfer. No one was ever available (outside the window) to respond to my queries regarding this.

Transfers can happen in exceptional circumstances but are also at the discretion of your Postgraduate Dean, there are no criteria for exceptional transfers. There are also other kinds of OOP that you could consider if waiting for a transfer window – OOPT for example allows you to continue your training and count the time to CCT. We hope to publish other alternatives to IDT for your consideration on our website in the next couple of months. We answer queries at all times of the year via our email inbox: idtinfo@southlondon.hee.nhs.uk

Application process is fine but the local areas do not release a lot of posts. They keep them for ST3 so makes the IDT system poor and not fit for purpose. Sorry but it is the reality

We are always trying to get more vacancies submitted to the process but it is important that programme management remains in the hands of local trainers and TPDs. Out of the trainees eligible for transfer, we usually manage to facilitate a transfer for half of them, this is not the greatest ratio but for those who get the transfers, it is an invaluable system. We are hopeful that as the process develops, we will be able to secure more vacancies for trainees needing IDT – we meet with a National Working group twice a year to discuss these very issues.

I had to search hard for the exact supporting evidence required. Little info about IDT on Yorkshire and Humber Website – only a link to outdated BMA site on IDT. There was no advertising on deanery website.

The correct email contact to sign the deanery document was hard to find on site. I didn't receive any reminders of deadlines. Overall the process is very good, clear and works well.

The emails are timely, helpful and thought-through.

We audited all the training regions websites before the window opened to make sure only up to date information was included or where it was not, made sure they had a link to our site. I agree that information is not always as prominent as we would like on training region webpages – we will continue to work with our partners around the country on this. The BMA web links I believe are up to date and we will be developing further links between our site and theirs in the future. We have also extended our working partners to include Royal Colleges and most have a small section relating to IDT linking to our website.

Deanery Document signatories can be found easily on our website on the 'Contact Us' page. At the top of the page there is a pdf available with all regional contacts:

<http://specialtytraining.hee.nhs.uk/inter-deanery-transfers/contact-us/>

I am not sure about this window but I felt my application was not dealt with enough seriousness in previous windows

The National IDT team takes great care in ensuring that all applications are treated according to our published guidelines. We do not make any qualitative assessment of your application and are trying to match application statements to the eligibility criteria so we can get trainees through to the allocation stage to have a chance of getting a post. We certainly take the facilitation of transfers for trainees very seriously.

I appreciate that this system has been developed to make things less complicated for those organising the transfers but this has serious consequences for those of us who have changes in our personal circumstances requiring us to move. I strongly disagree with the statement that this new system is more transparent.

The new IDT system was actually developed to make it fairer for all trainees applying and to ensure that each transfer does not take up hours of consultant time that could be better used in hospitals taking care of patients.

The old system lacked transparency because it is impossible to publish the qualitative thought processes that go into making a decision about whether someone should get an IDT or not, also, because it relied on different panels of consultants and lay people, decisions lacked the consistency that would have made it a fair process for all trainees, which is our aim. We now publish everything to do with our processes barring perhaps a clear explication of the vacancy declaration process, which we are planning on publishing before the next window. The trainee Guide to IDT explains the whole process; we also publish all our process maps and are happy to further clarify via email if trainees have any questions.

I feel that in being required to apply through the national IDT system I am being treated not as a professional adult but as a name / number on a spread sheet for whom the IDT team will not make any particular effort to facilitate a transfer. The system is forcing married couples with young children to live apart for months and possibly years, and may force me to take a further career break for childcare thus extending my training and denying me the opportunity to apply for certain consultant posts.

I think it is a non-sequitur to argue that we will not make an effort to facilitate a transfer – we can facilitate a transfer if there is an eligible trainee and an available post, it is really nothing to do with our effort, which goes into ensuring that we assess all applications we receive in a timely and fair manner against the published eligibility criteria as well as answering trainee and training region queries. We encourage vacancy submission by providing as much information as possible to training programme directors and training regions. We also provide anonymous data at the end of the window so they can see that trainees are applying to come in to their region and specialty.

A variety of factors affect post availability, including funding for posts having to be carefully apportioned and monitored, hospitals having a maximum training capacity that they cannot go over, a finite number of NTN in any one region for any one specialty (workforce planning), the need to recruit at entry level, the fact that funding is not per trainee but per post as well as other factors. This is why we say at the beginning of the Trainee Guide (which is also reiterated in the Gold Guide) that transferring is not an entitlement.

An OOPC is not the only option in this case, you can still continue your training in your preferred region and count up to 12 months toward your CCT by taking an OOPT for example.

The previous system which did not restrict when applications and transfers were made and allowed contact with prospective TPDs was much more respectful to the needs of the young professionals who needed to use it. The system feels like a blind process where we have to submit our application and see whether we 'get lucky'. Why is there no requirement for deaneries to submit vacant posts for IDT?

On the first point here you are more likely to be allocated a post under the new system than the old one. Because trainees could apply whenever they wanted, it was really down to luck and timing as to whether a post would be available, at least now, while there are not enough posts, all trainees who need to move have an equal opportunity of getting allocated to one.

There is no requirement to give the IDT process vacancies because of the various complications involved in programme management. Trainers have to be sure that, if submitting a vacancy, it is not just a vacancy for a year or two years but goes from the point of entry to the end of the programme. We do our best to ensure as many vacancies are submitted as possible and we would like trainees who require an IDT to be considered prior to trainees being recruited. In our working group conferences, we are always pushing for this and looking for new ways in which the transfer process could work to allow this to happen. We are currently conducting research into National Recruitment vacancy deadlines to see if we can clear IDT prior to Core/ST3 vacancies being submitted.

I don't understand why the application deadline can't be delayed until you are able to advertise the exact number of vacancies available to transfer candidates in each round. We are expected to rank 3 deaneries where we have no idea whether or not there are posts available, making the whole process completely fruitless if all three have no vacancies. ST3 national recruitment candidates are aware of post numbers and able to rank a larger number of deaneries.

I have been unsuccessful in this transfer process on two occasions now and feel that this is a contributing factor

It is popular to draw comparison between recruitment and National IDT vacancies, but they are very different. National Vacancies are worked out and declared almost a year in advance of interviews and have to take into consideration things like workforce planning and NTN numbers, whereas we like to give training regions as much time as possible to find vacancies on their programmes that they could submit to the National IDT process.

In the first two windows, vacancies were collected before the application window and it did not work at all – We feel it is much worse to think you are applying for an apparently existing vacancy only to have it withdrawn later than applying blind but having accurate vacancies to be allocated to at the end of the process. We do not allow preferencing of more than 3 training regions as trainees apply because they need to be somewhere quite specific – more than three would describe such a large region that it surely would not be helpful to trainee circumstances.

In future, we do not anticipate that we will know vacancies prior to application either, what we will do is send anonymous information to training regions showing eligible trainees applying to their specialties, training regions will then actively search for a post for you in that region and let the National Team know if you can be accommodated, we hope that this more proactive search will lead to more vacancies.

The main difficulty I had; was having to select one supporting document because I fell into 2 categories which were valid but had to apply just under 1 category. I think we should be able to apply in the least 2 categories if applicable. Like disability as well as caring needs etc

Applying under two categories would not benefit the system or trainees applying to it. This presumes some qualitative assessment of applications which does not take place – we just want to see that you are eligible under a category so we can put you through to the next phase of the process. The weighted category is Category 1 – Own Disability. By law, we make a reasonable adjustment for trainees applying under this category by considering their applications for allocation before others. All applications submitted under other categories are treated equally. We could not treat an application as 'more important' because your circumstances fit in more than one category.

Communication

I definitely did not receive an email regarding submission deadline warning. It was difficult to prove I was in a committed relationship when we were not married as we were a bit more traditional in that we did not have many bills together or formally live together etc.

For any trainee registered on the application portal by the final week of the application window, an email was sent regarding the submission deadline through the portal. Reminders were sent to registered users on 11th and 25th August through the application portal – sometimes these messages may go into your spam folder.

Following our most recent Equality Impact Assessment, which we run annually, we are currently looking at extending the evidence trainees can supply to support their committed relationship, you can find this assessment on our website at the following address <http://specialtytraining.hee.nhs.uk/inter-deanery-transfers/facts-and-figures/>

I would have liked to know if my supporting documents were acceptable as "joint financial responsibility" is rather vague. I would have called the helpline, but the instructions say we will not be told if our supporting documents are appropriate by the helpline.

In the Trainee Guide to IDT we do list the acceptable supporting documents for category 4. It says: "Trainees applying for Criterion 4 must also provide either a marriage certificate, civil partnership certificate or two examples of shared financial responsibility (such as joint mortgage/ joint tenancy agreement or joint utility bills or joint bank statements). All examples of shared financial responsibility should include the names of the trainee and the trainee's partner."

If you would like to submit an unlisted form of evidence please check with us either via the phone line in the application window or by email at any time. We will not tell trainees if they are eligible, but we are happy to discuss supporting documents.

I'm a London trainee in O&G and the deanery contact information link given was incorrect. It took me a while to track down the right person, but when I did they returned my form within 2 days. My email query was answered immediately by the IDT team and was really helpful

Because London is such a large region, we ask that London trainees contact their specialty team to get the Deanery Document signed – on the contacts page we give London trainees a link to a webpage with the specialty contact information for every specialty – this information is up to date.

<http://specialtytraining.hee.nhs.uk/inter-deanery-transfers/contact-us/>

Why should we be penalised for taking the initiative in contacting TPDs of prospective deaneries? I strongly disagree with this decision to forbid trainees from contacting TPDs in the deanery that they wish to transfer to. It could be made clear that contact does not necessarily mean you will get a transfer.

I don't think the explanation given on the IDT website for why this decision has been made is sufficient. If you asked all the TPDs I think you would find that they would be more likely to submit training posts to the IDT process if they knew there was a trainee who wanted to transfer onto their programme. I sincerely hope the IDT team are looking in to ways to increase the number of posts submitted to the process and that they will reconsider the decision not to allow discussion between trainees and prospective deaneries.

Firstly, trainees are absolutely not penalised for contacting a prospective training region, we do strongly advise against it however. This is covered in our FAQ:

“Who should I contact to find out about available posts?”

All communications of this type should be directed to the National IDT team and trainees are strongly advised not to contact colleagues in prospective regions to find out about vacancies. Contacting prospective colleagues can unfortunately create misunderstanding or raised expectations regarding vacancies, which is something we're very keen to avoid.

Therefore, having a single point of contact for trainees on matters such as these will ensure that a consistent level of information is received.”

What often happens is that a TPD is contacted and asked if they have gaps in their programme, the TPD may have people out of programme or on maternity leave and answers affirmatively. The trainee then thinks there is a vacancy and applies to National IDT but is not allocated and becomes frustrated by the fact they were told there were gaps and has not been allocated. Trainers and TPDs have to be sure there is a gap from point of entry to the end of the programme, a gap caused by an OOP or Mat leave would not be suitable for declaration to IDT. We prefer to avoid this kind of misunderstanding but of course, we cannot stop you from doing this and we do not penalise you for it. Also, TPDs cannot request a particular trainee, so they would not be able to submit a post *for you* anyway.

Training regions are made aware of trainees applying to get in to their region. The Trainee Guide states (in bold):

“13. The National IDT team will process the entire application form and all supporting documents, including the review of all information contained within for the purposes of checking eligibility. An anonymous report of basic trainee information (Application ID, Specialty, Level of Training, Current Region, Requested Region(s), Criterion applied under and request for LTFT) will be sent to colleagues in LETBs and Deaneries across the UK during the application stage.”

I contacted the help team with what I thought was a valid enquiry. The reply I got was basically, we can't help you, figure it out for yourself.

Firstly, we would never be as rude as this comment suggests! The only time we will not answer a query is when we are asked to determine eligibility over the phone or via email. We do say in the FAQ and on our website where the phone line number is advertised that we will not answer queries regarding eligibility as this is what the application process is for. We point trainees asking this question in the direction of the Trainee Guide which details how you may be eligible so a trainee can determine this before applying.

Providing good customer service is a central value of our team, we realise it is an anxious time for trainees applying and want to respond to this in a professional manner, giving timely and accurate responses to emails. In the last couple of months (August and September) we received almost a thousand email queries and responded to these in an average time of 1hr 45mins.

I think the phone line should be open on Mondays, also for longer in the evening and/or weekends - As it is only 4 weeks I think the phone line should be more accessible.

As we have fed back previously, we would love to have the phone line open for longer but I think it is easy to forget that while we are a national team, there are only two of us and there is a lot of work to complete during the application window that would not allow us to dedicate ourselves to the phone. I would also say that it is highly unlikely therefore that we will be running an evening and weekend phone service. In the hours the phone service is open, we do manage to pick up almost every single one of the calls made to us (I think we missed 4 in total over the last application window). We also prioritise email query responses during the application window and answer in an average time of about 1hr45mins, so you will always be able to get prompt answers to your questions.

The e-mail responses to my queries from the IDT service team were prompt, thorough and very helpful. Most of my correspondence was with ... who's timely and thorough responses were helpful and reassuring during what could otherwise have been an anxious and stressful application process. Really excellent.

Very helpful in answering emailed queries. Straightforward, user-friendly online portal.

We very much appreciate your positive feedback on our responses and the portal, we will continue to try and improve the service for all trainees in the UK.