

# Guidance for the Foundation Programme Re-Allocation Process in Wales

This guidance is relevant to applicants or current Foundation Doctors who have been allocated to a Programme in Wales, and whose personal circumstances have changed since submitting their Foundation Programme application or commencing the Foundation Programme, such that they require to be re-allocated to a different region within Wales.

For those that require to be re-allocated outside of Wales, please review the Inter-Foundation School Transfer guidance on the <u>UKFPO's website</u>.

### **General Principles**

- The basis for re-allocation is that the applicant can no longer manage their training alongside their personal circumstances in their allocated region.
- The criteria are aligned with the national Inter-Foundation School Transfer policy.
- Transfers will normally take place before the start of the F1 or F2 year (i.e. not mid-year), and applications should be submitted within the relevant application window.
- Transfers will only be agreed on the basis that there has been a *change in circumstances* since the Foundation application was submitted (for applicants) or since starting the Foundation Programme (for Foundation Doctors).
- Requests arising from a Pre-Allocation application not being submitted or being rejected by the national panel will not be considered.
- Approval for a re-allocation does **not** guarantee a transfer will take place. This will only occur if a suitable vacancy arises within the timeframe.
- Where a transfer takes place, the receiving Foundation Programme Director will be provided with your Supporting Trainee's Entering Training (STEP) form.

# Criteria

Please note that applications should include **one** criterion only. It is the applicant's responsibility to determine the most appropriate criterion to apply under.

All applications must be submitted with the specified mandatory evidence for the relevant criterion. *Please note that all signatures should be dated within 6 weeks of submission.* 

- 1) Parental Responsibilities
- 2) Primary Carer Responsibilities
- 3) Medical Condition
- 4) Unique Circumstances

Details and evidence requirements for each of the criteria can be found in the <u>UKFPO's</u> Inter-Foundation School Transfer guidance.



# **Application Process**

In the first instance, applicants should discuss their change in personal circumstances with the Foundation School (if a Foundation applicant) or their Educational Supervisor and/or Foundation Programme Director (if a current Foundation Doctor). It is expected that other ways to support the trainee in their original allocation will have been explored prior to requesting reallocation.

Where an applicant meets one of the criteria, they should obtain the required evidence and complete a "Re-allocation Request Form", and provide these to the Foundation School by email (<a href="https://example.com/HEIW.FoundationSchool@wales.nhs.uk">HEIW.FoundationSchool@wales.nhs.uk</a>) within the relevant application window. This form also requires applicants to rank the regions that they are prepared to be re-allocated to (with 1 being the most preferred). Applicants should rank as many regions as is appropriate for their request.

The Foundation School will convene a panel consisting of a Foundation School Director, a senior member of the Foundation School and a nominated administrator to review the applications against the above criteria.

Applicants will be advised of the outcome of their application in line with the specified timeline.

If the application is approved, applicants will be placed on a "waiting list" until a suitable vacancy becomes available. Applicants will only be made **one** offer and if this is declined, then they will be removed from the Re-allocation process and will remain in their original allocation. If no suitable vacancies become available before the re-allocation window closure, then unfortunately, we will not be able to accommodate the re-allocation and the applicant will remain in their original allocation.

If the application is rejected, the applicant will be notified of the reason(s) why it was not approved and provided with guidance for the appeals process.

#### **Re-allocation to Vacancies**

Please note that no consideration will be made regarding the relevant severity of each approved Re-allocation application when making an offer of a vacancy. Any vacancy arising will be offered to the applicant that has ranked that region the highest, and if two applicants have ranked the region equally then this will be offered at random.

If a suitable vacancy has not arisen by **1 month prior** to the start date we will not be able to accommodate a transfer on time.

#### **Exceptional Circumstances**

The expectation is that the majority of applications should take place within the annual timeline. However, we do recognise that some situations may require a transfer outside of this window.



These applications can be submitted at any time, however these will only be considered at the Foundation School's discretion.

Where a transfer can be facilitated outside of the annual timeline, the applicant is required to give sufficient notice to their allocated host organisation before taking up their new post.

#### **Appeals Process**

Applicants wishing to appeal a decision must submit the "Re-allocations Appeal Form" by email to the Foundation School within 10 working days of the review outcome. Appeals must be made under *at least one* of the three potential grounds for appeal, and a statement of up to 500 words can be used to outline the reasons for the appeal.

Appeals will only be considered if you can demonstrate that the review panel made an error or came to a decision in a prejudicial way. In the first instance, appeal forms will be reviewed by a Foundation School Director (who did not participate in the panel) to determine whether an appeal meets this requirement. Valid appeals will then be passed to the Postgraduate Dean to consider.

The applicant will be notified of the outcome of the appeal within 10 working days. The decision of the Postgraduate Dean is final and applicants will have no further right to appeal.



# **Re-Allocation Request Form**

This form should be completed in conjunction with the "Guidance for the Programme Re-Allocation Process in Wales" document, which can be found on the <u>Foundation School website</u> or request via email to <u>HEIW.FoundationSchool@wales.nhs.uk</u>.

Applicant Details				
Full Name				
GMC				
Your current				
address				
	Postcode:			
Allocated Region	,			
(See list below)				
Medical School				
Training Year	Pre F1 / F1 / F2			
Criterion	1/2/3/4			
	ne of your situation, I	now and when your circumstances changed and any further		
supporting information	required as evidence	under the application criterion.		

# **Regional Preferences**

Please rank all regions that you would accept a re-allocation to in order of preference (1 being the highest). You can rank as many or as few as is appropriate for your application

Region	Main Hospital(s)	Rank
Betsi Cadwaladr (West) UHB	Ysbyty Gwynedd, Bangor	
Betsi Cadwaladr (Central) UHB	Glan Clwyd Hospital, Rhyl	
Betsi Cadwaladr (East) UHB	Wrexham Maelor Hospital, Wrexham	
Hywel Dda (Ceredigion) UHB	Bronglais Hospital, Aberystwyth	
Hywel Dda (Pembrokeshire) UHB	Withybush Hospital, Haverfordwest	
Hywel Dda (Carmarthenshire) UHB	Glangwili General Hospital, Carmarthen Prince Philip Hospital, Llanelli	
Swansea Bay UHB	Single Hospital, Swansea Morriston Hospital, Swansea	
Cardiff & Vale UHB	University Hospital of Wales, Cardiff University Hospital Llandough, Llandough	
Cwm Taf Morgannwg (West) UHB	Princess of Wales Hospital, Bridgend	
Cwm Taf Morgannwg (North) UHB	Prince Charles Hospital, Merthyr Tydfil	
Cwm Taf Morgannwg (South) UHB	Royal Glamorgan Hospital, Pontyclun	
Aneurin Bevan UHB	Nevill Hall Hospital, Abergavenny Ysbyty Ystrad Fawr, Ystrad Mynach The Grange University Hospital, Cwmbran Royal Gwent Hospital, Newport	

# FPD Declaration (current Foundation Doctors only)

I confirm that the above named Foundation Doctor has discussed with me their intention and reasons for requesting reallocation.

Full Name:	
Signature:	
Date:	

# **Applicant Declaration**

- 1. I have provided all the evidence requested under the Re-allocation in Wales policy.
- 2. The information contained within this application form and associated documents is correct and truthful.
- 3. I understand that this application will be treated confidentially, and that information within this application and supporting documents may be passed to the receiving region's Foundation Programme Director.
- 4. I understand that I am expected to take up the programme offered to me within one of my ranked regions within Wales. If I decide not to take up the offered programme my Re-allocation application will be terminated.

Signature:	
Type name or insert signature photo file if available	
Date:	



# **Re-Allocation Appeal Form**

This form should be completed if you wish to submit an appeal regarding the outcome of your reallocation application. An appeal may be submitted where the applicant is able to demonstrate that the actions of reallocation panel have not followed procedure when managing and reviewing a reallocation application, in line with the Wales Foundation Re-allocation Policy.

All appeals must be submitted within 10 working days of the Re-allocation Outcome decision.

Please submit appeals to: <u>HEIW.FoundationSchool@wales.nhs.uk</u>.

Applicant Details		
Surname:	First Name	
Email:		
Reason for App	eal	
☐ The proces	s was not applied with appropriate diligence or due care	
☐ Decisions	regarding your application were made in a prejudicial way	
☐ That the panel did not follow due process and this resulted in an error in the assessment of my reallocation request		
Provide brief ar	nd clear comments about your application for appeal (maximum 500 words)	
Declaration		
I confirm that:  The above information is correct and truthful.		
I have state	d my grounds for appeal which I wish the appeals panel to consider.	
I hereby formally submit my request to appeal the outcome of my reallocation application.		
Signed		
Date		