



How the OOP Process works and revalidation when on OOPR (for doctors)

What is this OOPR thing?

If you are a clinical trainee (doctor) within a clinical training programme your period of research will usually be labelled as “Out of Programme for research” OOPR. If you had not already formally applied for this from your clinical training programme director (TPD) you must act now! It cannot be applied retrospectively.

If you are undertaking a PhD between training programmes e.g. between Core and Higher Training or between Foundation and Core Training, then you may not require any formal approval and this does not count as OOPR since you are not “in” a training programme. If you are an ACF (Academic Clinical Fellow) however then you must apply for OOPR from your clinical training regardless of your clinical stage (CT₁/IMY₁/ST₁ and beyond), since you have “run-through” training from whatever stage you started and need approval from the TPD to leave the clinical training programme.

Is OOPR ever declined?

Yes. OOPR is not a right. But this is unusual with appropriate planning. The NHSE/Deaneries Gold Guide has clear guidance on the issue. You must have successfully progressed through your clinical training and have a recent ARCP outcome 1. If your clinical training is not progressing satisfactorily you cannot take OOPR. You must give plenty of notice to your TPD, a minimum of 3 months and often 6 months or even 12 can be needed before you can be released into OOPR. This is so as not to disadvantage your clinical colleagues or the needs of patients.

Who oversees my career during OOPR?

During OOPR you are formally “managed” for clinical training by your NHSE/Deanery clinical Training Programme Director and must keep in touch over your future plans (e.g. date for return to clinical training). Your employer however is usually the university or Trust through which you are funded, and who will sort any HR-type issues.

Do I need an ARCP every year while on OOPR?

You will still be invited to attend an academic ARCP, and will almost certainly require a clinical ARCP in your first research year, to cover your previous year of clinical training prior to taking up the PhD – you MUST ensure that you have submitted all required paperwork for this. An academic ARCP is meant to be supportive so you can be assured you are progressing through your research appropriately. If there is prospective approval from the GMC for the OOPR to contribute to the CCT or CESR(CP)/CEGPR(CP), then formal assessment documentation must be submitted annually to the ARCP panel.

Trainees must submit an annual OOPR return to the ARCP panel of their base locality in NHSE, NES, the Wales Deanery or NIMDTA along with a report from their named academic supervisor. All academic trainees on OOPR should have a formal assessment of academic progress, which is submitted as part of the documentation for the ARCP panel as described above for joint clinical and academic programmes. The report must indicate whether appropriate progress in the research has taken place during the previous year and also whether the planned date of completion of the research has changed. Any request for a potential extension to the OOPR will need to be considered separately by the Postgraduate Dean.

An ARCP is usually not done “in person” and may be a review of your portfolio and appropriate supervisor reports.





Who is my Responsible officer when on OOPR?

During an OOPR period your GMC mandated Responsible Officer (RO) remains the Postgraduate Dean for the region in which you were a clinical trainee taking OOPR, and not where you are working (if these are different). You will not be required to undertake any other formalities but must return any necessary paperwork to the NHSE office/Deanery annually as requested especially around the scope of your clinical activity. If you are undertaking absolutely no clinical work at all in any form then you may wish to suspend your licence with the GMC but then you can undertake absolutely no clinical work in the UK of any sort, and must remember to renew your licence when returning to clinical practice. This is rarely done.

If you are not on an OOPR then you do not count as a formal “trainee” and the Dean is not your RO: in this case the Medical Director of your NHS Trust is most likely to be your RO and you must meet their requirements to confirm adequate evidence for appraisal. This will often require an annual appraisal with a clinical lead and the appropriate evidence. Your NHS Trust will tell you exactly what you need to provide and how.

Are there any requirements of the GMC whilst I am on OOPR?

If you have an honorary NHS contract you must fulfil the obligations of that organisation for statutory (core skills) training. There are no additional requirements.

Can OOPR count towards clinical training?

The GMC must prospectively approve clinical training out of programme if it is to be used towards a CCT or CESR(CP)/CEGPR(CP) award. This could include overseas posts or posts in the UK that are not already part of a GMC approved programme in the same specialty. If you want some clinical activity to count towards training this must be approved by the GMC in advance, through your clinical TPD and Postgraduate Dean. When OOPR does not count towards CCT or CESR(CP)/CEGPR(CP) requirements, GMC approval is not required.

Frequently Asked Questions about OOPR

Q. I am not on OOPR as I have yet to be awarded an NTN (start a specialty training programme); What should I consider?

A. You must ensure you know the requirements and exclusions for your potential next clinical training programme e.g. is there a maximum period away from clinical work that is allowed, or a maximum time from Core Training. You should consider how you can show you have retained clinical skills and knowledge relevant to your specialty if having a 3 year gap from seeing patients.

Q. Can I extend my OOPR?

A. OOPR is normally granted for 3 years, assuming appropriate progress is being made. If you have clear reasons for needing to extend this time, supported by your Academic Training Programme Lead, and by the university academic lead (at Imperial, the Director of CATO), then this may be available but requires a formal written request to the Postgraduate Dean for their approval, and may be granted in exceptional circumstances.

Q. Am I guaranteed my clinical post on returning from OOPR?

A. You are guaranteed a clinical training post within your region, but not a specific post. You must keep in touch with your clinical TPD during your OOPR (especially if in a different region) so they know when you are planning on returning from OOPR. Give as much notice as possible. If you provide less than 6 months' notice there is no obligation on them to have a post instantly available. Ideally tell them at least 12-18 months in advance.

Notes:

- This guidance sheet has been prepared specifically for Doctors in training