

# Flexible working: promises for the new workforce or challenges for the existing one?

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# Postgraduate Medical Training Review

- Phase 1 report ‘diagnostic’ published October 2025

“Recommendation 3: Training should become more flexible”

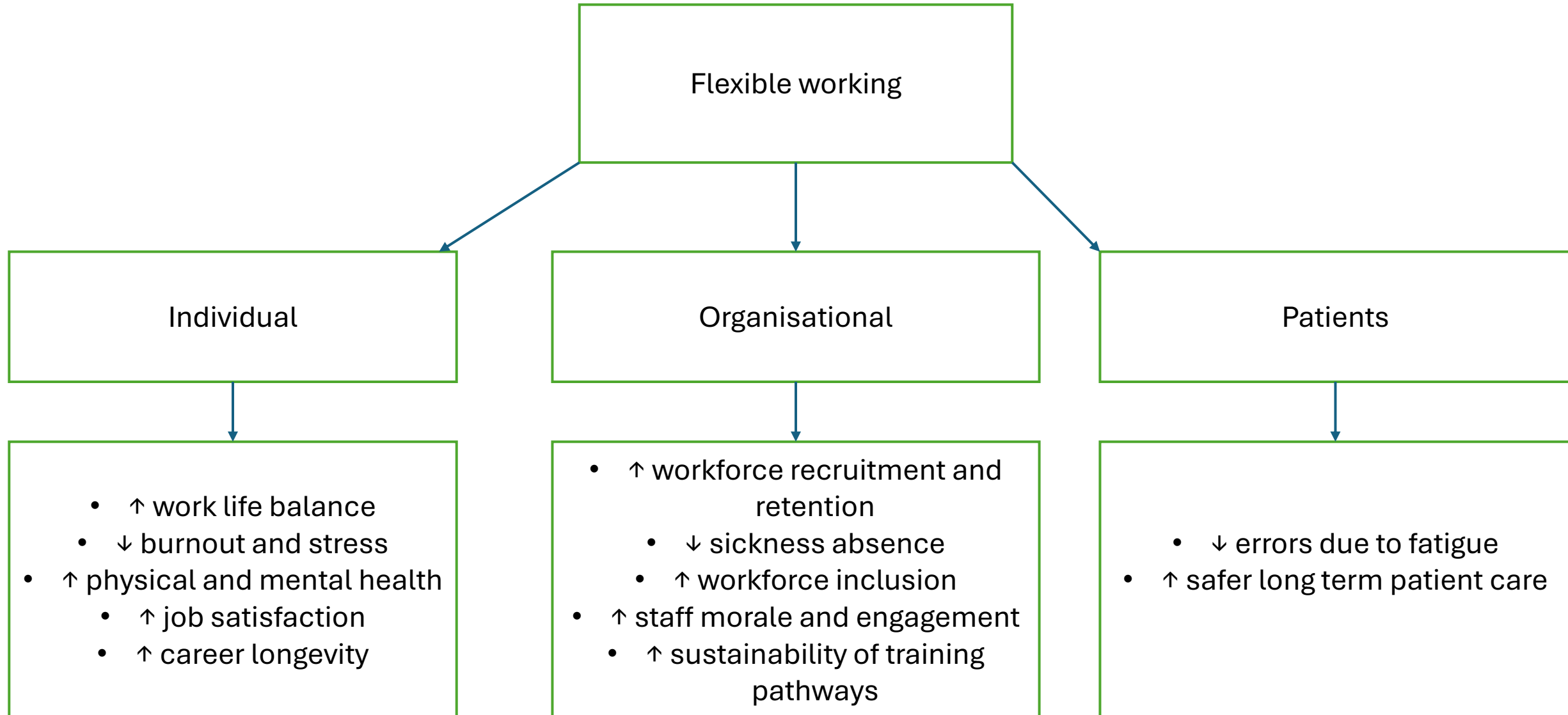
# Flexible working: Options

- **LTFT**
- **OOP**
- **Flexible portfolio training**
- Others:
  - Annualised hours
  - Fixed or flexible rota patterns
  - Job sharing
  - Self or preferential rostering

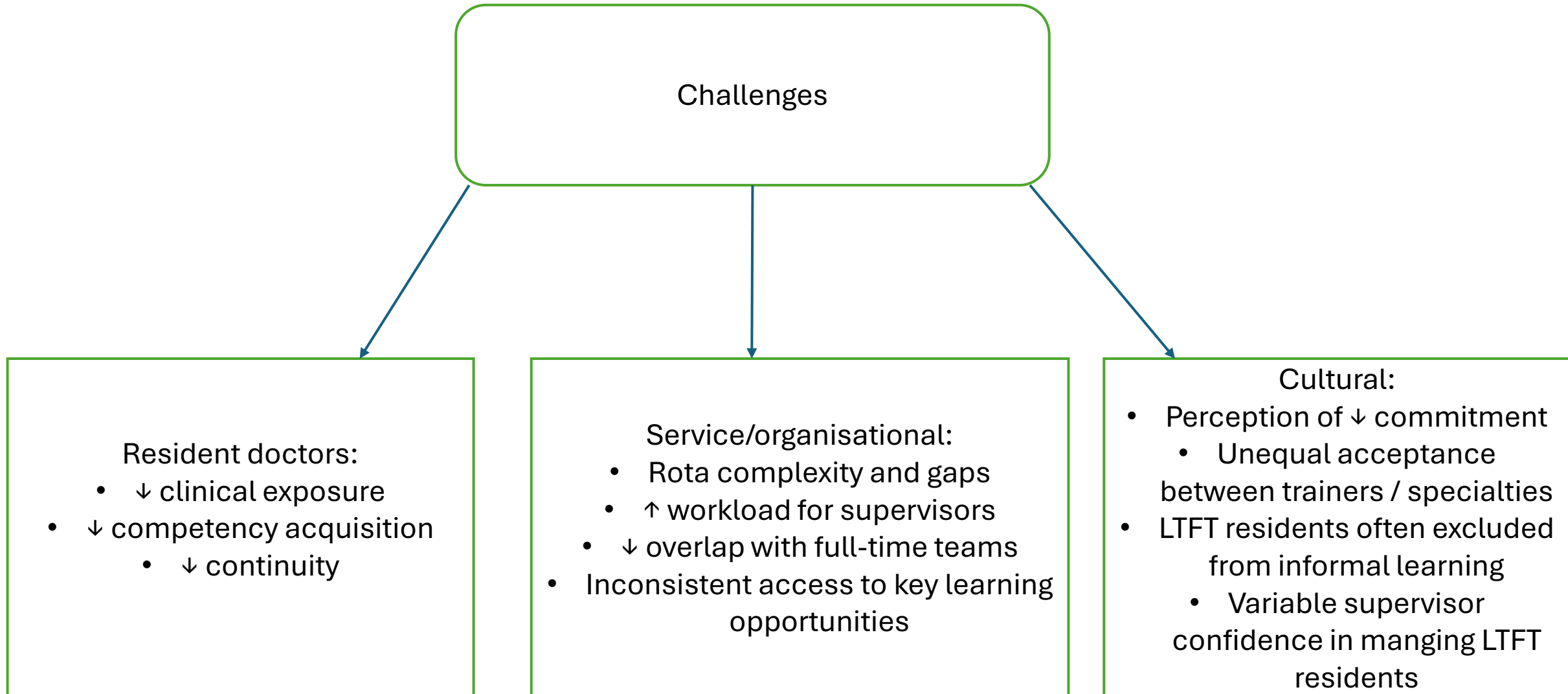
# Why does flexible working matter?

- ↑ workforce pressures within NHS
- Burnout and workforce retention concerns
- Changing workforce demographics
- Post-pandemic expectations around work-life balance

# Benefits of flexible working



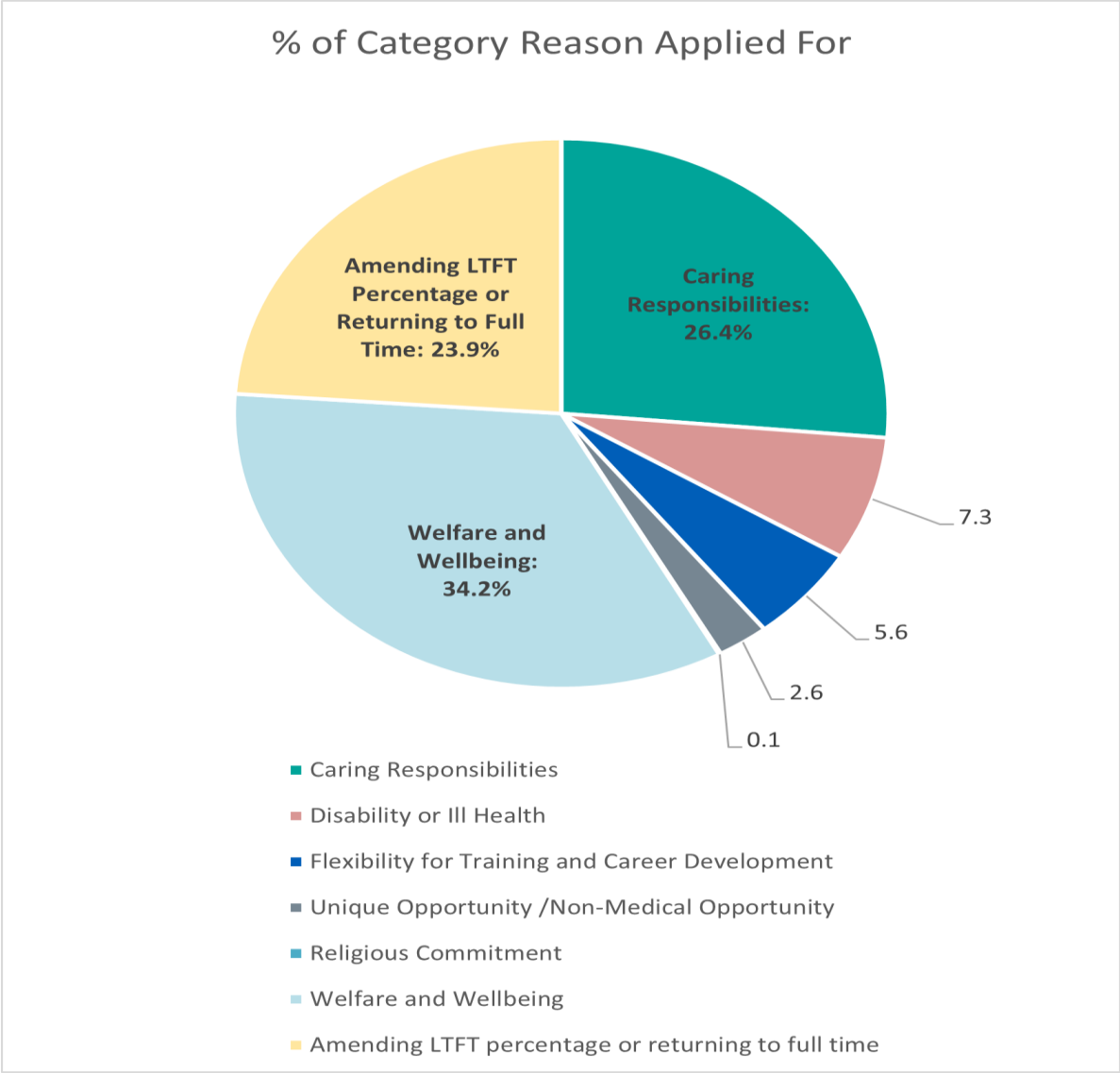
# Challenges



# LTFT

- ↑ no. residents undertaking LTFT working (from ~ 9.1% in 2013 to ~17.1% in 2022 – GMC survey data)
- 30% female residents and 15% male residents training LTFT (GMC National Training Survey, 2025)
- 66% working 80% LTFT
  - Childcare responsibilities (44%)
  - Work-life balance (66%)
- Burnout and work-life balance key drivers

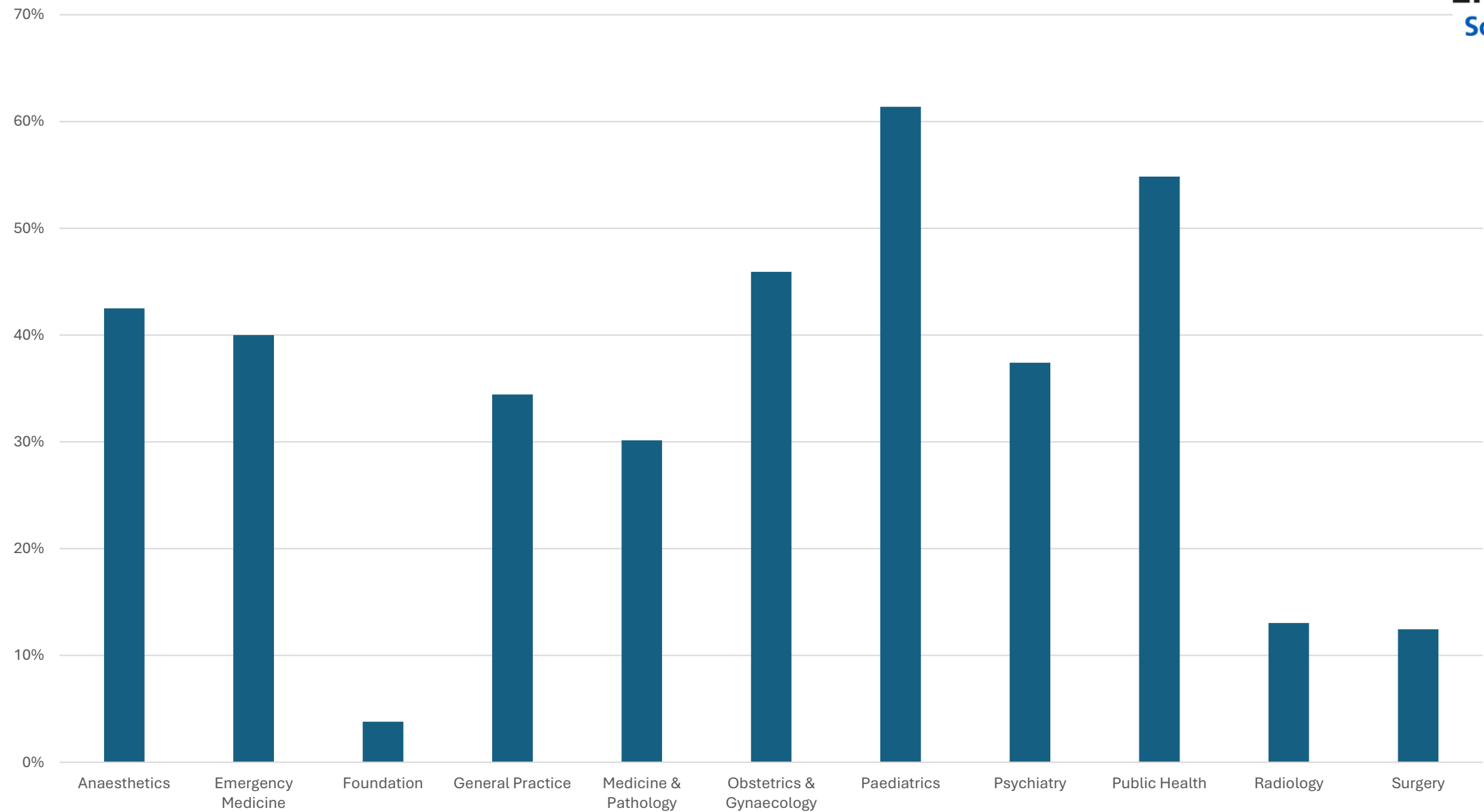
# Wessex LTFT data





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- LTFT residents 26% of Wessex RD workforce (April 2025)
- Majority working 80% LTFT (61.5%), 60% LTFT (27.8%)



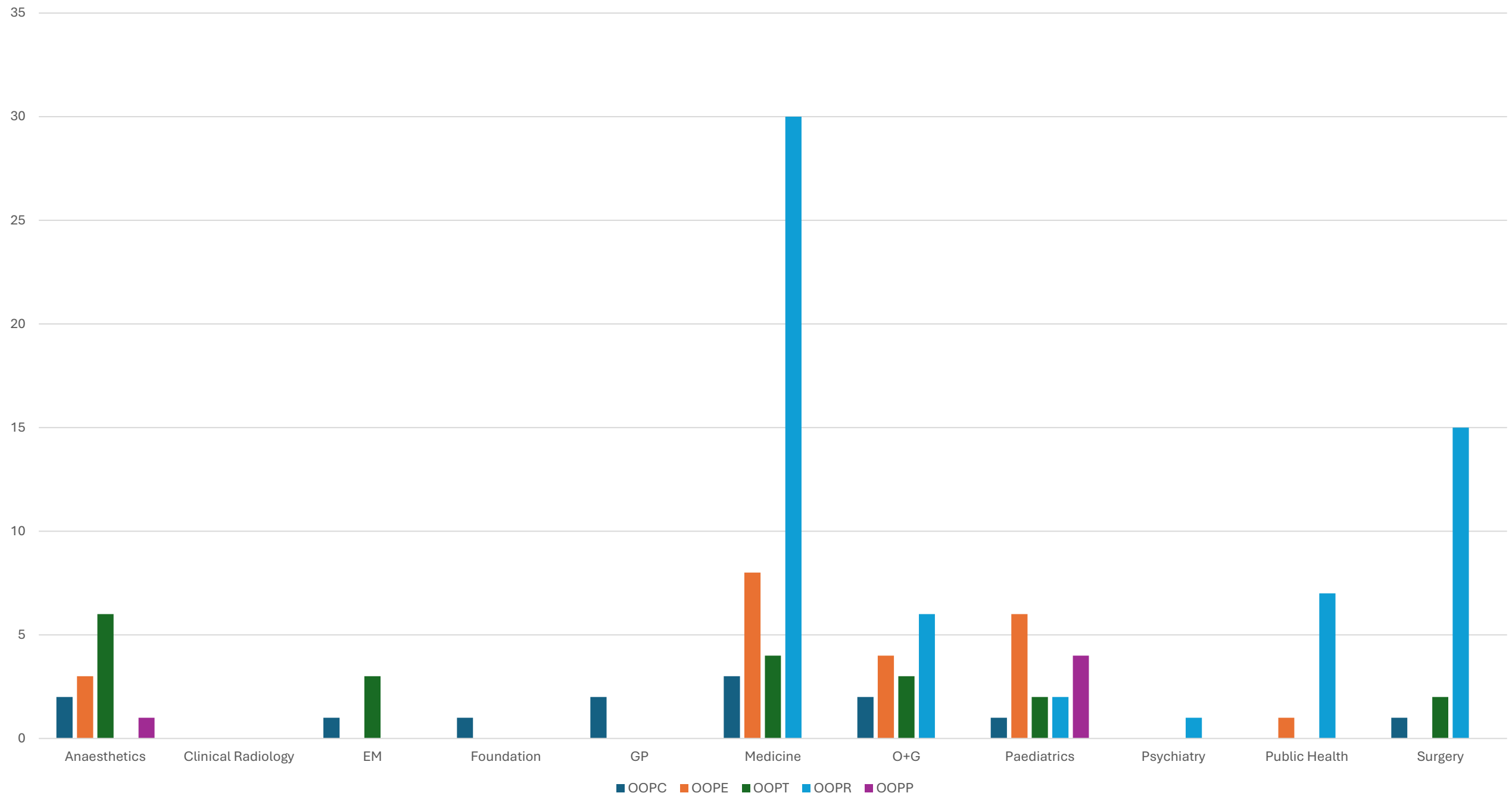
# OOP

- OOPP now embedded; OOPT/OOPE/OOPR/OOPC
  - 12months OOPC (up to 2 years on Dean's discretion)
  - 3 years OOPR (up to 4 years on Dean's discretion)
  - 12 months OOPE/OOPT/OOPP
- OOP not normally permitted during Foundation/Core Training unless exceptional circumstances (GG rule 3.151, 3.156)
- OOP not permitted during first year run-through/higher specialty training unless exceptional circumstances (3.156)
- OOPR not permitted during final year of training (3.172)

# OOP data

- % residents on OOP (3.78%) – total 3251 residents in Wessex; 123 residents on OOP
  - OOPC: 0.4%
  - OOPE: 17.89%
  - OOPT: 16.26%
  - OOPR: 49.59%
  - OOPP: 4.07%

OOP resident doctors in Wessex



# Flexible portfolio training

- Initial RCP pilot and developed from Enhancing Doctors Working Lives (EDWL) programme; handed to HEE April 2022
- 1 day/week on FPT, 4 days/week clinical, full-complement of on-calls (assuming 100% WTE)
- Not affect training progression
- 4 workstreams: Medical Education, Clinical Informatics, Research, Clinical service improvement (QI)
- ST3/4+ doctors eligible
- Tailored to individual training programmes
- 12/12 allocation
- Requires TPD, DME/College Tutor and ES support

# Questions for discussion

- How can you promote LTFT and FPT working within your organisations whilst balancing against challenges such as rotas?
- How can you promote OOP within your training programmes whilst balancing against training capacity? Can we simplify OOP counting towards training?
- How can we effect cultural change to promote flexible working?