

## ***Less than full time training: Real men do it too!***

The RCoA estimates that 95% of less-than-full-time (LTFT) trainees are female, but there's nothing to stop their male counterparts from enjoying the benefits of LTFT training as well. Here, Oliver Boney, an anaesthetic LTFT specialty trainee outlines a male perspective on LTFT training:

*Why should male trainees consider less-than-full-time training?*

- Because they are a dad, and want to see their children more
- Because they are a dad, and want to pull their weight with the childcare / housework / weekly shop, instead of leaving it all to their partner
- Because they have other caring responsibilities (e.g. looking after elderly or disabled relatives) they want to devote more time to
- Because they have health problems that make working full-time difficult
- To improve their work-life balance
- Because they are a professional footballer / X-factor winner / virtuoso violinist, or have another extraordinary gift in something non-anaesthetics related, and want to fulfil their true potential

*Can all men train LTFT if they want to, then?*

- Alas not quite. However, if they fall into 'Category 1', they're automatically eligible:
  - Parents of young children
  - People caring for a disabled relative
  - Doctors who can't work full-time for health reasons
- The following *may* be allowed to train LTFT at the discretion of their Deanery:
  - Doctors working in other employment (paid or unpaid) for the rest of the week
  - Doctors wanting to pursue non-medical interests
- In practice, this means that, if you have children, your Deanery is most unlikely to refuse (unless you foolishly lead them to suspect you want to train LTFT for reasons other than childcare)
- If you don't have children (or other criterion for category 1), you'll probably have to think of some worthwhile reasons / extracurricular pursuits to convince your Deanery

*How do consultants react when they discover you're a LTFT trainee?*

- Generally positively – and especially if they've got young children themselves
- Sometimes with mild surprise; or with thinly disguised envy
- Occasionally, you might have to work slightly harder to prove to them you're not a slacker – but most consultants will judge you on how you do the job

*Don't you feel like you lose status among your (male) peers?*

- Not really – most trainees are mature enough and broad-minded enough to realise that life isn't all about anaesthetics, and respect the fact that other people have other priorities different from their own
- The key is to ensure all the trainees on your rota are getting a fair deal – i.e. that as a flexible trainee, you're still doing your fair share of on calls. (In fact, this is a requirement of training as well, so if you're training 80% LTFT, you must work 80% of the nights / long days / weekends that full-time trainees work.)
- And as always, it's appreciated if you're prepared to make an effort to help cover sickness / rota gaps when your outside-work commitments allow

*And how has training LTFT affected your own view of work?*

- I enjoy it more: because even when things are really busy, I know I've got protected family time coming up
- This makes work less stressful – there's nothing like a day looking after a toddler for some post-Labour Ward downtime...
- But at times, work also provides a welcome escape from the chaos of a young family – the quiet control of a well-organised anaesthetic can be pure bliss after a few days of toddler-induced mayhem!

*Have you encountered any unexpected pitfalls?*

- Not really – although at first I hadn't fully appreciated the complexity of negotiating my rota with each new hospital I rotate through
- You need to plan ahead to ensure you have enough time to fulfil the requirements for a specific block (e.g. the minimum number of cases / theatre sessions / WPBA's)
- Some deaneries may force you to do 6 month blocks to meet the requirements of a 3 month (full time) block, even if you're training more than 50% LTFT.
- For example, I decided to go back to working full-time for 3 months to complete my higher ITU training – if I stayed at 80%, I'd have to do 6 months
- Again, careful planning and discussion with your College Tutor (and / or Training Programme Director) is the best way to avoid any nasty surprises

*What are the other implications of LTFT training I should think about?*

- Your CCT date will be pushed back
- You'll earn a bit less
- You'll build up pensions contributions more slowly
- Who's the main breadwinner in your household? If it's you, can you support yourself and your partner / family on your reduced salary? Assuming you have regular outgoings (mortgage / car loan /

nanny or nursery payments etc.), you need to make sure you've calculated exactly how much you'll bring home each month, and whether you can meet your financial obligations

*Ok, I'm interested. Who should I speak to if I'm considering training LTFT?*

- First up, you might discuss it with any LTFT trainees you know, to get their perspective on the pros and cons. (Though they're likely to be female, as already mentioned)
- Second, you might want to discuss your plans informally with your Educational Supervisor / College Tutor (or any consultant you find approachable)
- Once you've decided you definitely want to train LTFT, you'll need to discuss it with your Training Programme Director
- Assuming he / she agrees, you then need to start the application process, details of which can be found on your Deanery website, or the AAGBI's thoroughly informative 'A-Z of LTFT training'

If you would like more information about LTFT training in Anaesthesia then contact [gat@aagbi.org](mailto:gat@aagbi.org).