**Doctors in Training not taking up OOP**

* This form should be used where an OOP has been agreed and arranged, but will not start, on account of COVID-19 issues.

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| **Trainee Name**  |  |
| **GMC number** |  |
| **Training Programme** |  |
| **Name of Training Programme Director** |  |
| **Training Region** |  |
| **Home address** |  |
| **Email address** |  |
| **Planned start date of OOP** |  |
| **Type of OOP (e.g. OOPE, OOPR, OOPT)** |  |
| **Reason(s) for not taking up OOP** |  |
| **Are you immediately available to continue to provide clinical service (ie on Day 0 of the cancelled OOP)?** |  |
| **Name of Host Institution where OOP had been arranged** |  |
| **Name of supervisor in host institution** |  |
| **Email of supervisor in host institution** |  |
| **Has the funding body agreed to a delayed OOP start? Are there any conditions / restrictions?**  |  |
| **Which Health Board would you prefer to be deployed in?** |  |
| **Can you estimate what date you would be able to take up your OOP, once the current situation improves?** |  |
| **Is there anything else you would like us to be aware of?**  |  |
| Section for Deanery Administrative purposes  |
| LDD |  |
| TPD notified |  |
| Training manager notified |  |
| DME notified |  |