**Paediatric Critical Care Society (PCCS)**

**Guidance for Deferral from a PCCS Ratified Course**

This guidance should be read in conjunction with your Trust’s study leave policies and if a conflict in wording exists; discuss with your course lead and manager.

**What is Deferring from a course?**

* Deferring from a course of study is usually requested by a student when a change in their circumstances happens which could not have been predicted when the student started their course of study.
* If deferral is requested during the assessment process period, extenuating circumstances may be more appropriate (See PCCS Extenuating Circumstances guidance).
* Deferring is different to withdrawing from a course. Deferring implies that the student plans to return to their studies at a specified time in the foreseeable future.

**Procedure for Deferral**

If a student wishes to ask for a deferral:

1. The first action is to talk it though with their manager and course lead.
2. Once a period of deferral has been agreed the form on page 2 must be signed and copies kept by all three parties.
3. **The maximum deferral period is 12 months**, a longer period than this will impact on the student’s abilities to resume their studies where they left off without considerable support from the course and clinical teams.
4. If the maximum deferral period is exceeded, the student may be required to re-start the course from the beginning.

**Reasons for Requesting a Deferral**

(This is a suggestive not comprehensive list.)

* Pregnancy and maternity leave.
* Career break (which was not planned at the start of the course).
* Long term sickness/injury.
* Long term sickness or injury to a family member.

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**Deferral Form**

By signing this contract:

* You, the student, are agreeing to resume your studies by the date you have agreed to.
* Extensions beyond this time frame will only normally be granted in exceptional circumstances.
* If you do not resume your studies by the agreed date, you may be liable to fee reclamation as per your Trust’s study leave policy.
* If your Trust policy requires it, you may have to complete their relevant paperwork also.
* This form should be held locally.

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| **A. Student Details** | |
| **Full Name:** | Click or tap here to enter text. |
| **Job Title:** | Click or tap here to enter text. |
| **Profession:** | Click or tap here to enter text. |
| **Hospital:** | Click or tap here to enter text. |
| **Ward Department:** | Click or tap here to enter text. |

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| **B. Module Information** | |
| **Course Title:** | Click or tap here to enter text. |
| **Level of Paediatric Critical Care:** | Click or tap here to enter text. |
| **Start Date of Course:** | Click or tap here to enter text. |
| **End Date of Course:** | Click or tap here to enter text. |
| **Proportion of PCC course attended:** | Click or tap here to enter text. |
| **Proportion of PCC assessment completed:** | Click or tap here to enter text. |
| **If declared, reason for deferral (including supporting evidence):** | Click or tap here to enter text. |
| **Agreed length of Deferral/ expected date of resumption of studies:** | Click or tap here to enter text. |

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| **C. Request Agreed By** | | | |
| **Job Title:** | **Name:** | **Signature:** | **Date:** |
| **Learner** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Department Manager/Matron** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Course Lead** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |