

JUNIOR DOCTOR CONTRACT

Mrs Paula Eyre, Head of Medical HR

Dr Guy Veall, Guardian of Safe Working Hours

**PROUD
TO MAKE A
DIFFERENCE**

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST



Why change?

All parties (BMA, DH, NHS) agreed that the current (New Deal) contract was no longer fit for purpose:

- **Safety:** does not support safe working practices
- **Training:** does not support the educational and training needs of doctors
- **Pay:** has perverse incentives that do not recognise or effectively reward hours being worked or the intensity of work being done.

A new contract needed to be introduced that was safe, fair and effective for both doctors and employers.



Limitations of the New Deal contract 2002

- BMA and DDRB thought basic pay was too low compared with other graduates.
- Perverse incentive: breaching EWTD limits resulted in more pay.
- Significant variation of individual earnings as a trainee moved between posts and placements.
- Did not harmonise education, training, and service needs.
- Pay progression was based on time served, instead of performance, competence, or responsibility.



New Contract Implementation Timeline

- **October 2016** - Transition to the new terms and conditions of service for:
 - ST3+ in obstetrics and gynaecology training programmes.
- **November – December 2016 (106 doctors)** - Transition to the new terms and conditions of service for:
 - F1s (taking up next appointment)
 - F2 (taking up next appointment and sharing a rota with F1s)
- **February – April 2017 (34 doctors)** - All grades taking up next appointments in:
 - Psychiatry
 - Pathology
 - Paediatrics
 - Surgical trainees (under JCST)
 - Any F2 and GP trainees at ST1/2 who share a rota with trainees above in this category.
- **August – October 2017** - All remaining existing trainees; all new entrants

PROUD TO MAKE A DIFFERENCE

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST



Main Features of the New Contract

The main features of the new contract are split into 3 categories:

- **Safe Working**
- **Training**
- **Pay**

PROUD TO MAKE A DIFFERENCE

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST



The New Terms and Conditions (pay)

- Higher basic pay – more stable pay
- More sensitive to variations in working hours
- But - averaged across the working pattern
- Pay progression linked to responsibility and point of training – no longer time served (4 nodal points)
- Reward targeted at doctors working onerous rotas and unsocial hours



Training Grade Doctors – Old ‘V’ New titles

Old Structure	New Structure
Foundation Trainees – FY1 & FY2	
Pre-Registration House Officer (PRHO)	Foundation Doctor 1 (F1)
Senior House Officer (SHO) 1 st Year	Foundation Doctor 2 (F2)
Core Trainee’s – CT1, CT2, GPST, StR 1 – 2/3	
Senior House Officer (SHO) Year 3 onwards	Specialty Registrar (CT)
Specialist Trainee – ST3/4 – ST8	
Specialist Registrar (SpR)	Specialty Registrar (StR)

PROUD TO MAKE A DIFFERENCE



The new pay system: additional pay

- All additional hours (above 40) in a doctor's work schedule will be paid at the rate of $1/40^{\text{th}}$ of a full-time salary
- Additional hours will be rounded up to the nearest fifteen minutes (quarter-hour)



The new pay system: night pay

- Night work is defined as work after 2100 and before 0600
- All work falling into the above hours is paid at an enhanced rate of 37% above basic pay
- In some cases (set out in the TCS), the 37% enhanced rate is also paid to hours directly before or after the above, where the hours are worked as part of a night shift.



The new pay system: on-call allowance

- A doctor rostered to be on-call will be paid an allowance. The allowance is the same regardless of the frequency of the on-call duty.
- These will be set as a percentage (8%) of full time basic salary.



The new pay system: weekend allowance

- Shifts/duty periods beginning on a Saturday or Sunday at a minimum frequency of 1 in 8 will be paid an allowance of basic salary:

Frequency	Percentage
1 in 2	10%
<1 in 2 – 1 in 4	7.5%
<1 in 4 – 1 in 5	6%
<1 in 5 – 1 in 7	4%
<1 in 7 – 1 in 8	3%
<1 in 8	No allowance



The new pay system: Flexible Pay Premia

Flexible Pay Premia will be available to the following:

- Hard-to-fill specialties, currently:
 - Emergency Medicine
 - Psychiatry
- OMFS, to recognise the dual qualification requirement
- General Practice
- Integrated academic training pathway
- Return to training pathway after undertaking a higher medical degree on Out of Programme Research (OOPR).
- Exceptional circumstances where the doctor has taken time out of training to do activities of benefit to the wider NHS (none at present).

PROUD TO MAKE A DIFFERENCE

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST



Existing Working Patterns

As a consequence of the new limits on safe working hours, all existing working patterns are being reviewed to ensure compliance with the new contract.

PROUD TO MAKE A DIFFERENCE

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST



Work schedules

- Are they job plans for juniors? No...but there are similarities.
- They will set out the expected service commitments *and* relevant training opportunities required / available in the post.
- Each doctor will have a personalised work schedule which they will discuss at the regular meetings with their educational supervisor. These discussions may lead to a change to the work schedule.



Generic work schedule will:

- Be given to doctors with their contract and prior to starting in placement.
- Include the doctor's hours/on-call arrangements.
- Include the doctor's clinical care/service duties.
- Include any specific training requirements for the doctor's grade (defined by the relevant curriculum).
- Be the basis for their personalised work schedule.



Personalised work schedule will:

- Be agreed with doctors after commencement and updated as necessary to reflect the doctors training needs.
- Be agreed by the doctor and educational supervisor.
- Set out the doctor's personal objectives in training and service delivery.



Locum work

- Doctors who wish to do additional paid work as locums will be expected to offer this first to the NHS
- This can be for any NHS employer
- It will be paid at national locum rate



Guardian of Safe Working

- This is a new role; Dr Guy Veall appointed September 2016.
- Designed to oversee the Safeguards outlined in the contract and provide assurance that working hours and practices are safe.
- Where problems have not been resolved doctors can escalate their concerns to the Guardian who will be empowered to require departments to take necessary action
- Required to ensure a web-based system of reporting is introduced



The Guardian of Safe Working Hours will:

- Act as the ‘champion’ of doctors’ safe working hours. Provide assurance that doctors are both rostered safely and actually working safely.
- Have sight of all exception reports, and undertake regular reviews of exception reports and work schedule reviews to ensure that hours remain safe.
- Ensure that work schedule review processes are followed. Require a work schedule review to be undertaken where there are regular or persistent breaches in safe working hours, which have not been addressed.
- Escalate issues to the Board where concerns over working hours have not been addressed locally.
- Report regularly to the Board.
- Set up Junior Doctors’ Forum.



Exception reporting

- Variance from this work schedule is called an exception
- Exceptions may arise from working longer hours or from missing an educational component described in the work schedule
- An exception must be reported in order that patterns of variance can be addressed and so that junior doctors may be compensated for excess work undertaken
- Exception reporting is carried out using a web based system and is overseen by the Guardian
- An open exception is an exception that has not yet been dealt with, a closed exception has been dealt with and agreed by the doctor and the supervising clinician



Breaches incurring financial penalty

- The doctor will be paid for the additional hours at the penalty rate.
- The fine will be levied against the department employing the doctor for the additional hours.
- Money raised through fines must be used to benefit the education, training and working environment of trainees.
- The Guardian of Safe Working should devise allocation of funds in collaboration with the Trust Junior Doctor Forum.
- The funds must not be used to supplement resources that are defined by HEE as fundamental requirements for Doctors in Training i.e. study leave, IT etc.

PROUD TO MAKE A DIFFERENCE

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST



Conclusion

- The principles within the new contract are a constructive addition
- I very much look forward to using the information provided to stimulate improvement in junior doctors working conditions
- Our aim must be to establish a high calibre, motivated and valued junior medical and dental workforce to be part of the team providing the best quality healthcare throughout our Trust



Questions?

PROUD TO MAKE A DIFFERENCE

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST

