

**NORTHUMBERLAND, TYNE AND WEAR NHS FOUNDATION TRUST**

**BOARD OF DIRECTORS MEETING**

**Meeting Date:** 27 April 2016

**Title and Author of Paper:** Junior Doctors' Contract  
Amanda Venner, Head of Workforce Planning & Medical Education

**Paper for Debate, Decision or Information:**  
Debate and Information

**Key Points to Note:**

- Contract to be imposed from August 2016 for Foundation Year 1 trainees
- All remaining NTW based trainees will be offered the new contract in February 2017
- Guardian of Safe working to be appointed in the next few months
- Changes to rotas and working patterns being carried out as a matter of urgency
- Work Schedules to be introduced
- Cost impact to be finalised
- Risks to morale/engagement of Junior Drs and recruitment into training schemes

**Outcome required:** None

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### **Purpose**

This paper is to update on the implementation of the new Terms and Conditions of Service for NHS Doctors and Dentists in Training 2016.

### **Background**

NTW typically has between 125 and 150 doctors in training working within it. The trust has contracts with Health Education England (NE& Cumbria) to deliver training for these doctors and their posts are jointly funded by NTW and HEE. The majority of these doctors are not directly employed by NTW although work within the trust. In addition to receiving training these doctors are an essential element of the service delivered to patients within the trust, both during normal working hours and out of hours.

The current contract for Junior Drs was introduced in 2000, covering two key areas; training and service provision. A scoping report was commissioned by the Government to look into the viability of the contract considering how seven-day services varied across the UK and the ongoing affordability of the NHS. The parties involved (BMA, Trusts, NHS Employers) came to a consensus that the existing contract was no longer suitable, and this provided the basis for negotiations between NHS Employers and the BMA. Formal negotiations commenced in October 2013, with the BMA withdrawing on two separate occasions over the period until they balloted their members on Industrial Action in September 2015. Around 70% of Junior Drs voted in favour of Industrial action. Talks resumed in December 2015 but no agreement was made and industrial action has followed in January, February and March 2016, where the Junior Doctor workforce provided 'Emergency Care Only'.

There has been substantial progress in negotiations since the end of last year and all significant issues associated with safety and training were largely addressed by both parties. The BMA has refused to compromise on its insistence that the whole of Saturday must be paid at a premium rate although the Employers' position has moved several times, on each occasion offering more hours attracting premium pay.

As a result, in February 2016, Jeremy Hunt (SoS) announced that he would be imposing the contract and the final Terms and Conditions of Service were published on 31<sup>st</sup> March 2016.

### **Update**

There are a number of changes that form part of the new contract and these must be implemented in line with the government's timetable. The implementation is phased with the first new contracts

being offered to Foundation Year 1 trainees on 3 August 2016. The remainder of psychiatry and GP trainees will then be offered new contracts in February 2017.

Guardian of Safe Working – this role has been developed as part of the new contract to oversee the safeguards introduced and ensure compliance of safe working hours. Each Trust must appoint a Guardian by July 2016 and how this role will operate is for Trusts to decide. Remuneration for this role is currently being considered and we are looking to advertise this role, within our medical workforce, in the coming weeks.

Trust on call rotas - detailed work is underway to update these for Junior Drs as the new contract contains a number of changes to working hours and patterns to ensure safety. Junior Drs are involved in this work and are helping ensure our rotas are safe, supportive and fit for purpose.

We have a number of Trust employed Drs who are currently working into vacancies in the training scheme and work is ongoing to explore the exact terms and conditions they should be employed under, as currently they are employed under the old contract.

Work schedules are a new component of the new contract and will state activities to achieve learning and service objectives, scheduled duties, time for quality improvement and patient safety activities, periods of formal study and the number and distribution of hours for which the Dr is contracted. Each Junior Dr will receive a generic work schedule prior to taking up post and this will then be personalised with their educational supervisor on commencing employment.

Cost implications -there will be increased costs associated with the new contract and urgent work is underway with finance colleagues to estimate these. Most trainees will see an increase in base salary and associated pension contributions and it is still unclear if the Lead Employer Trust, via Health Education England, will contribute to these costs. In addition to these there is a £1,500 annual flexible pay premia for all trainees in psychiatry as it is a hard-to-fill programme. For existing trainees earning less as a result of the new contract there are protection arrangements in place for three years to ensure they are not suffering a loss. It is widely expected that the Trust will pick up these costs. The ongoing work on rotas will also likely have a cost implication.

There were a number of changes to the final draft contract on its publication and these included extra provision for staff in less than full time posts, those taking approved time out of training and those on maternity leave for the basis of pay calculations.

## **Impact**

The changes to working hours will potentially be disruptive to daytime work as Junior Drs working patterns change and increased rest periods are introduced. This will affect service and training and will need to be closely monitored at a service level.

Our proximity to Scotland, where the contract is not being introduced at this stage, presents a real risk that trainees will choose to continue their training there under the old contract. The new contract could also impact on international recruitment with those Drs opting to work in other parts of the UK or Europe.

Our higher trainees do not work a full shift rota so will lose out under the new contract as they will only be paid for the hours they actually work on call, as opposed to a % of their salary. Work is

underway to review the higher trainees (second on call) rotas to ascertain if these can be moved to a full shift, placing trainees on the wards.

There is also a notable impact on the engagement and morale of our Junior Drs. This has been a challenging, frustrating and emotive time for them and it has been disheartening for them, and Trusts, that the contract is being imposed. NTW have worked hard to engage with our Junior Drs and have held a number of meetings and forums to discuss views and offer support. This will continue for as long as necessary.

### **Next Steps**

The next period of industrial action is due to take place on Tuesday 26<sup>th</sup> April 8am-5pm and Wednesday 27<sup>th</sup> April 8am-5pm and this is a full walk out of Junior Drs. The Trust emergency protocols are in place and a gold command centre will be in operation on both days. The services are currently identifying who their medical points of contact will be for these days and updating the command team on planned work that is to be cancelled. This will potentially have a much greater impact than the previous strike days this year as there will be no emergency care provision by the Junior Drs. A physical health team is being assembled to support and advise the remaining workforce and this team will be guided by the gold command team on the strike days.

Communication remains a high priority during this time of change and uncertainty and we will continue to ensure that all staff are informed as appropriate.

Five Junior Doctors are challenging the Secretary of State in the High Court over his powers to impose the contract. It's unclear if this will have a bearing on the situation but it will be high profile in the media.

### **Recommendation(s)**

The Board is asked to be aware of the ongoing and changing situation and await further updates.