



THE SCOTTISH OFFICE

Department of Health
COMMON SERVICES AGENCY
TRINITY PARK HOUSE

NHS
MEL(1997)18

NHS Management Executive
St. Andrew's House
Edinburgh EH1 3DG

10 April 1997

FOR REFERENCE ONLY

Dear Colleague

JUNIOR DOCTORS' HOURS: RETURNS FOR 31 MARCH 1997

Summary

1. This letter encloses a set of forms requesting statistical returns for junior doctors' hours for the 6 months to 31 March 1997.

Action

2. Trusts and Health Boards should:

- provide statistical returns for the 6 months to 31 March 1997 by 9 May at the very latest. We are aware that some Trusts have had difficulty in complying with deadlines in previous rounds, but it is essential to have this information on time;
- note the re-designed layout of the forms which should improve the accuracy of completion and more clearly identify those Trusts experiencing problems in meeting the New Deal targets in full;
- again provide statistics on class 2 ADH payments for intensive on-call rotas to determine whether work intensity has been reduced;
- ensure that the validation sheet is signed by both a junior doctors' representative and the Chief Executive to give confidence that reliable figures are returned to the Management Executive. If, in exceptional circumstances, the signature of a junior doctors' representative cannot be obtained, return the forms with a letter of explanation.

Addressees

For action:

Chief Executives, NHS Trusts

General Managers, Health Boards

General Manager, Common Services Agency

General Manager, State Hospital's Board for Scotland

For information:

Executive Director, Scottish Council for Postgraduate Medical and Dental Education

Postgraduate Deans and Directors

General Manager, Health Education Board for Scotland

Enquiries to:

Mr K McMillan
Directorate of Human Resources
NHS Management Executive
Room 61A
St Andrew's House
EDINBURGH EH1 3DG

Tel: 0131-244 2476
Fax: 0131-244 2837

KMA05003

SCOTTISH HEALTH SERVICE COMMON SERVICES AGENCY TRINITY PARK HOUSE LIBRARY	
CLASS	
ACC. IP-18: 100317	
Date	Price

COMMON SERVICES AGENCY	
RECEIVED 14 APR 1997	
FILE No	
REFERRED TO RW 14/6	ACTION TAKEN



045400 106

- supply a similar letter of explanation if the information requested is either inaccurate or unknown;
- take immediate steps, in consultation with junior doctors' representatives, to develop and introduce systems to record accurately juniors' actual hours of work and to monitor these to ensure that they do not exceed 56 per week on average;
- copy this letter to Medical, Clinical and Human Resource Directors for action as necessary.

3. Details of what is required are set out in Annex A attached.

Yours sincerely



MISS JANET McGREGOR
Acting Director of Human Resources

JUNIOR DOCTORS' HOURS OF WORK

1994 Target

1. The December 1994 target that no junior doctors working on a hard-pressed on-call rota should be contracted for more than an average of 72 hours a week has been met by the great majority of Trusts. We expect the remaining few to reduce the contracted hours of juniors to the required level now, if this has not been done already. If juniors are contracted for over 72 hours simply because they are on protected salaries, their contracts should be amended. Similar reductions must also be made where there are juniors employed on full and partial shifts whose contracted hours exceed 56 and 64 respectively.

1996 Target

2. The December 1996 target was to ensure that juniors in all on-call rota posts are contracted for no more than an average of 72 hours a week and that their actual hours of work do not exceed 56 per week on average, regardless of work intensity and pattern. The statistical returns for juniors' hours at 30 September 1996 (summary attached) showed that 2,714 junior doctors were on on-call rotas. Of these, 116 were contracted for more than an average of 72 hours. The number of posts where the returns indicated that hours actually worked exceeded 56 was 458 (excluding 10 Trusts which returned no information). These figures represent an improvement on the position in March 1996, but further reductions are required.

Doctors in Higher Specialist Training

3. Doctors in higher specialist training in non-hard-pressed posts may continue to contract for an average of up to 83 hours per week in order to benefit their training, providing the proper supporting structure exists and the duties are not harmful to either trainee or patient (the "English Clause"). "English Clause" trainees should not have to work an average of more than 56 hours a week.

Statistical Returns for 31 March 1997

4. A set of forms for completion at 31 March is attached. Some of the forms have been amended to improve clarity and to increase the likelihood of accurate reporting, with the emphasis on accurate recording of actual hours worked. We appreciate that for many Trusts poor monitoring has resulted in difficulties in providing accurate information and would stress the need for Trusts to develop effective monitoring systems. If any data is thought to be inaccurate or is not known, a letter is now required to explain the nature of the problem and to describe what action is to be taken to resolve it.

5. All returns must be validated by a nominated juniors' representative and the Trust Chief Executive. This gives staff and management an opportunity to amend or comment on the returns with the aim of increasing the reliability of information. Where significant problems are being encountered by Trusts or Units in reaching the targets, further details would be welcome.

6. Trusts and Health Boards should ensure that all forms are completed and validated and then forwarded, along with any additional, explanatory information, to Mr K McMillan, Directorate of Human Resources, Room 61A, St Andrew's House, Edinburgh EH1 3DG by 25 April 1997. Further information may be obtained, if necessary, from Mr McMillan on 0131-244-2476

**DOCTORS AND DENTISTS IN TRAINING
STATISTICAL RETURN FOR HOURS OF WORK
AS AT 30 SEPTEMBER 1996
SUMMARY**

SCOTLAND

Col 1 Grades	Col 2 Number Funded Posts by Grade	PART-1 CONTRACTED HOURS										PART 2 - HOURS ACTUALLY WORKED		
		Number Funded Posts by Form of Working					Number Posts Worked at On-Call Rotas							
		(a) Full Shift		(b) Partial Shift		(c) Rota	(d) 73 Hours or Over		(e) 72 Hours Or Less		Col 1 Number Posts Where Hours Actually Worked Exceeded 56			
Senior Registrar	396x	Over 56 Hours	56 Hours or Less	Over 64 Hours	64 Hours or Less	7	374	Hard Pressed	Non-Hard Pressed	5		19	84	266
Registrar	402.9ø	-	10	-	33.5	-	344.4	-	8	128	208.4	41		
Specialist Registrar	364.5	-	9	28	53.5	2	274	2	26	115	131	49		
SHO	2033.6#Δ	-	212	27	369	11	1,398	11	44	644	699	230		
PHRO	663	-	30	7	302	1	324	1	-	256	67	110		
TOTAL	3,860	-	270	62	765	19	2,714.4	19	97	1227	1371.4	458*		

PART 1 - CONTRACTED HOURS - NOTES

If Nil, Write Nil

Col 1 - Specialist Registrar grade is now included

Col 2 - Dentists in the training grades should be included

Col 3 - The total of Col 3 should equal the total of Col 2.

Col 4 - i. (d) is defined as a 1:4 rota with prospective cover or worse.

ii. (e) is defined as a 1:4 rota without prospective cover or better.

iii. Hard Pressed is defined in the Appendix..

* Information unknown for the following Trusts, Aberdeen Royal Hospitals, Central Scotland Healthcare, Greater Glasgow Community, Hairmyres & Stonehouse, Lanarkshire Healthcare, North Ayrshire & Arran, Southern General Hospital, Stirling Royal Infirmary (partial figures only), West Glasgow Hospitals, Western Isles Health Board.

x 6 no on call

ø 15 no on call

Δ 25.6 no on call

2 vacancies

PART 2 - HOURS ACTUALLY WORKED - NOTES

If Nil, Write Nil

Entries should derive from monitoring exercises and should not be contracted hours.

If Unknown, Write UNKNOWN

FORM 1

**DOCTORS AND DENTISTS IN TRAINING
STATISTICAL RETURNS FOR HOURS OF WORK
VALIDATED POSITION AS AT 31 MARCH 1997**

Trust/Health Board: _____

SUMMARY

Grade	Total Number of Posts	Number of Posts meeting		Number of Posts <i>Not</i> Meeting Contracted and Actual Hours Targets									
		Contracted Hours Targets	Actual Hours Targets	Contracted Hours			Actual Hours						
				Full Shifts	Partial Shifts	Rotas	Full Shifts	Partial Shifts	Rotas				
Senior Registrar													
Registrar													
Specialist Registrar													
SHO													
PHRO													
TOTAL													

FORM 7

**DOCTORS AND DENTISTS IN TRAINING
RETURNS FOR COMPLIANCE WITH NON-HOURS TARGETS
VALIDATED POSITION AS AT 31 MARCH 1997**

Trust/Health Board: _____

ACCOMMODATION	CATERING	SECURITY

Enter YES in the box if the New Deal standards have been met in full, or NO if they have not. Note below any plans to ensure the New Deal non-hours targets will be met where this is not already the case.

**DOCTORS AND DENTISTS IN TRAINING
STATISTICAL RETURNS FOR HOURS OF WORK
AS AT 31 MARCH 1997**

**CLASS 2 ADH PAYMENTS FOR
INTENSIVE ON-CALL ROTAS**

Trust/Health Board: _____

GRADE	Number of Posts Receiving Class 2 ADHs	Total Number of ADHs	Have the Payments Reduced Work Intensity? YES/NO
Senior Registrar			
Registrar			
Specialist Registrar			
SHO			
PRHO			
TOTAL			

Examples

3 registrars each working 40 standard hours and 19 ADHs

5 SHOs each working 40 standard hours and 32 ADHs

Total Number of ADHs = 3 x 19 plus 5 x 32 = 57 + 160 = 217

	Number of Posts Receiving Class 2 ADHs	Total Number of ADHs	Have the Payments Reduced Work Intensity YES/NO
Registrar	3	57	Yes
SHO	5	160	Yes
TOTAL	8	217	

FORM 9

DOCTORS AND DENTISTS IN TRAINING
 STATISTICAL RETURN FOR HOURS OF WORK
 AS AT 31 MARCH 1997

DOCTORS IN HIGHER SPECIALIST TRAINING
 WHO MAY BE CONTRACTED FOR MORE THAN 72 HOURS PER WEEK
 (The "English Clause")

Trust/Health Board _____

POST ¹ (GRADE)	SPECIALITY	HOSPITALS	WORK ² PATTERN	CONTRACTED HOURS HARD PRESSED NON-HARD PRESSED	HOURS ACTUALLY WORKED

- NOTES:-
1. List each post by Grade on a separate line.
 2. Indicate on-call rota, full shift or partial shift.
 3. For explanation of the "English Clause" see attached definition.

THE ENGLISH CLAUSE

1. The English Clause - Paragraph 8 of the 'Working Arrangements of Doctors and Dentists in Training (The New Deal Doctors in Training)' - allows certain categories of doctors in training to work in excess of 72 hours:-

"In certain situations higher specialist trainees may continue to contract for duties in excess of a 72 hour maximum average per week (though not for more than a maximum average of 83 hours per week) when it would be to the benefit of their training and they wish to do so, providing proper support staffing exists and providing the duties are not harmful either to trainees or to patients. If managers have concerns about such an arrangement they should consult the relevant medical Royal College".

2. The New Deal states that the English Clause should not be applied to trainees in hard pressed posts.

3. The English Clause is not a means of allowing trainees in hard pressed posts to exceed an average of 56 hours of actual work per week. MEL(94)87(Annex A) states that "few of these posts will be hard-pressed" and "no English Clause optee should have to work on average more than 56 hours a week".

4. The English Clause will only become relevant after 31 December 1996 when no junior should be contracted to work more than an average of 72 hours.

5. All the following criteria should be met before the English Clause is invoked:-

- The request to work in excess of 72 hours should be initiated by the trainee or Trust management should seek full agreement with the named trainee. It is not acceptable to apply the English Clause to a post. The English Clause applies to the trainee and not the post. When the individual trainee's contract expires then so does the application of the English Clause to that post, it does not translocate to the new incumbent;
- The trainee must be a higher specialist trainee;
- The trainee must not be in a hard pressed post;
- Quality of care and patient safety is of paramount importance. Trust management must ensure that invoking the English Clause does not compromise these;
- It must benefit the training of the trainee and not merely be used to avoid 'problems' arranging appropriate cover for overnight On Call duties.

Directorate of Human Resources
Scottish Health Service Management Executive

VALIDATION SHEET FOR FORMS 1-9

TRUST/HEALTH BOARD: _____

The returns are now required to be validated by a representative of the junior doctors and by the Trust Chief Executive. Before being finalised, the forms should be passed to the junior doctor giving him/her the opportunity to amend or annotate them as appropriate on completion. The following questions should be answered by the juniors' representative before signing and passing to the Chief Executive for his signature.

- 1. Have forms 1-9 been completed to your satisfaction? YES/NO

- 2. Are there effective monitoring mechanisms within the Trust or Unit to determine actual hours of duty and actual hours of work? YES/NO

- 3. Are you satisfied that these monitoring mechanisms are designed to provide an accurate account of the position on contracted hours of duty, actual hours of duty and actual hours of work? YES/NO

- 4. If the answer to question 3 is YES, have the monitoring mechanisms been used in the completion of forms 1-9? YES/NO

Any other comments (continue on a separate sheet if necessary):

NAME (BLOCK CAPITALS): _____

TRAINING POST HELD: _____

REPRESENTATIVE CAPACITY: _____

SIGNATURE: _____

Please pass this form to the Chief Executive.

I have seen the returns and am satisfied that any necessary checks have been undertaken and any problems concerning their completion have been resolved.

NAME (BLOCK CAPITALS): _____

SIGNATURE: _____