

# ***Welcome & Introductions***

## ***Lead Employer***

***Jim Flynn - Senior HR Project Manager***

***Debbie Livesey – Head of HR and Stakeholder  
Engagement***

# The Role of the Lead Employer

- Trainees are **EMPLOYED** for the duration of their training programme by StHK LE. One employer for the entire life cycle of training
- StHK LE work closely with HEEEOE as the **EDUCATIONAL** lead organisation for GP speciality trainees.
- StHK LE also works closely with Host Placement Organisations i.e. GP Practices, Hospitals, Hospices, etc where trainees will be based throughout their training programme.

## *The big picture – who does what? This is fundamental..*

- **Lead Employer** – Overall employment responsibility including e.g. restrictions/exclusions and disciplinary matters. \* *LE Model offers a single point of contact, co-ordinating with all stakeholders including third party agencies i.e. Police, Safeguarding etc.*
- **Host** – Day to day management, and day to day supervision of training by clinical & educational supervisors
- **HEE EOE:**
  - Responsible Officer
  - Supervision of training & progress in training

**Nowhere is it more important and imperative that we work together than with the 2016 Contract**

# Junior Doctors Contract 2016

## IMPLEMENTATION

- Current ST2/ST3 GP Trainees will not transfer to the new contract unless they need a new contract e.g. following an ARCP, change in specialty.
- Due to late change of LE no ST1 GP trainees will transfer Feb to April 2017
- All Current ST1 trainees will transfer in August 2017
- All new starters will commence 2016 contracts in August 2017

## Work Schedules

- A work schedule is produced by the host organisation setting out the
  - ❖ Intended learning outcomes
  - ❖ Scheduled duties of the doctor including time for quality improvement/ research/patient safety/formal study (other than study leave)
  - ❖ Number and distribution of hours contracted and pay for those hours.
- All trainees should be issued with a generic work schedule by the Lead Employer at least 8 weeks before starting post.
- Host Organisations must send the work schedule to the Lead Employer to meet this deadline NB Failure to do so may lead to a breach of the code of practice/contract – potentially a short term loss of pay
- Standard template for GP Practices + guidance document issued – it's critical this is adhered to – cost and compliance implications – TIL for OOH
- Personalised work schedule is agreed by the Educational Supervisor with trainee on commencement - based on learning needs and the opportunities within the placement.

## Exception Reporting

- Informs host/employer when work varies significantly and/or regularly from the agreed work schedule e.g. hours, education, support
- Report sent by trainee within 14 days (7 if claim for pay) to Educational Supervisor + Guardian (hours) or Director of Medical Education (training)
- Anticipated that the Directors of Medical Education for GP practices will be the Directors of GP Education
- Each host will have its own exception report tool but the Lead Employer will provide one while in GP Practice via our Allocate system – to be communicated to trainees and GP practices
- Where an immediate and substantive risk to the safety arises this should be raised immediately (orally)
- Can lead to a work scheduling review
- National guidance to be issued

## Work Schedule Review Process

- The doctor, educational supervisor, manager, or the guardian can requested a work schedule review
- Consider safe working, working hours, educational concerns and/or issues relating to service delivery.
- Level 1 – informal resolution - meeting with Educational Supervisor (or CS) within 7 days – can lead to
  - ❖ No change to the work schedule
  - ❖ Prospective documented changes are made to the work schedule
  - ❖ Compensation or time off in lieu
  - ❖ Organisational change
- Level 2 – if trainee not satisfied with stage 1 - trainee, service representative, ES (CS) and nominee of Guardian or DME
- Level 3 – If trainee not satisfied with stage 2 - conducted as final stage of Lead Employers grievance procedure – DME/nominated deputy present

## Role of Educational Supervisor

- Defined in the contract as being responsible for supporting, guiding and monitoring the progress of the trainee
- Can be delegated to Clinical Supervisor if ES not in host site
- Agree personal work schedule with trainee
- Discuss learning experience with trainee regularly
- Receive exception reports
- Conduct/participate in work schedule reviews



## Guardian of Safe Working

- Ensures that issues of compliance with safe working hours are addressed by the doctor and/or employer/host organisation
- In larger hosts their Guardian is responsible for Lead Employer trainees - overseen by a Lead Employer Guardian, Mike Chadwick
- Lead Employer has appointed a Guardian covering GP practices and other smaller hosts - Peter Arthur
- Responsibilities include:
  - ❖ Acting as the champion of safe working hours for doctors
  - ❖ Providing assurances to doctors/employers that doctors are safely rostered
  - ❖ Receiving copies of exception reports in respect of safe working hours
  - ❖ Escalating issues in relation to working hours to an executive director
  - ❖ Requiring intervention to mitigate any identified risk
  - ❖ Requiring a work schedule review to be undertaken
  - ❖ Intervening in any instance where the safety is compromised
  - ❖ Distributing monies received as a consequence of financial penalties

## Safe Working Hours Constraints

There are many constraints in the contract (schedule 3) which include:

- Standard 40 hours pw – additional hours paid at 40 of weekly pay
- Maximum average weekly hours 48 (NB HEE funding limited to 40 hours) - maximum in any 7 days 72 hours -penalties if exceeded. NB Can opt out to max 56 hours average if undertaking locum work(must offer to NHS and inform employer/ES)
- Maximum daily hours 13 hours
- A maximum of eight shifts of any length can be rostered on the trot
- Minimum 11 hour break every 24 hours - less than 8 hours = penalties
- On call (available at home for patient care), nights, weekend working allowed, attract additional payments – financial constraints on practices
- ½ hour paid break if shift 5-9 hours, 2 x ½ hour break if shift > 9 hours

**NB If in GP practice the template work schedule is followed the practice will normally be compliant – subject to managing OOH**

## Out of Hours

- ST3 72 hours in 12 months - ST1/2 36 hours in 6 months
- Scheduled in accordance with availability and with agreement of supervisor
- ST3 No more than 6 weekends pa - ST1/2 no more than 3 weekends in 6 months
- ST3 no fewer than 12 and no more than 22 of these hours to attract night enhancement (21:00 – 07:00)
- ST1/2 no fewer than one and no more than 11 of these hours to attract night enhancement (21:00 – 07:00)

## Safe Working Hours Constraints and Out of Hours

- When 6 hours 'Out of Hours' is worked time in lieu (TIL) will need to be provided from Standard 40 hour week in the work schedule.
- This can sometimes be allocated at the discretion of the GP Practice and the trainee and need not always necessarily be in the same week.
- However dependent on when the out of hours is worked it may be necessary to structure the TIL to ensure compliance with the contract's maximum working day and minimum break requirements
- In these cases it could be that the TIL has to be taken from working hours on the day the out of hours is worked or from the day preceding or following day.
- Remember where the minimum rest requirement of 11 hours is reduced to fewer than eight hours those hours below the 11-hour rest period will attract a penalty

## Conclusion

Memorandum of Understanding between the Lead Employer & all host to be finalised & issued in the coming weeks – facilitates contractual compliance

NB In the unlikely event that any host is unable to accept  
- cannot provide for trainees under their auspices

GP Practices need to be encouraged to gain an awareness of the new 2016 Terms & Conditions, to use the work schedule template & to send in their work schedules.

- Please do not hesitate to forward any questions you may have in respect of the Junior Doctor Contract to: [Jim.flynn@sthk.nhs.uk](mailto:Jim.flynn@sthk.nhs.uk)/  
[Katherine.Coleman2@sthk.nhs.uk](mailto:Katherine.Coleman2@sthk.nhs.uk)/[Suzanne.lea@sthk.nhs.uk](mailto:Suzanne.lea@sthk.nhs.uk)
- NHS Employers  
[http://www.nhsemployers.org/~link.aspx?\\_id=E45B575B18AB41D5AB79CF0A0F450DB2&\\_z=z](http://www.nhsemployers.org/~link.aspx?_id=E45B575B18AB41D5AB79CF0A0F450DB2&_z=z)
- HR Direct <http://leademployer.sthk.nhs.uk/>

