

## Briefing from NHS Employers

I have recently been contacted by constituents regarding proposed changes to junior doctors' contracts. This is an important topic and one which understandably many feel very strongly about. Junior doctors play a vital role in the NHS. The Government is seeking a fairer contract for junior doctors and for patients. To assist MPs in responding to this correspondence, this briefing provides a summary of background to discussions around a new contract, and the current position and role of NHS Employers in these discussions.

### Background

On the 21 July 2015, the Secretary of State for Health, Jeremy Hunt, announced that he expected the British Medical Association (BMA) to make a decision on its willingness to work with the Government to introduce modernised professional contracts for junior doctors (and consultants).

The Junior Doctors' Committee (JDC) explored the possibility of re-entering negotiations with NHS Employers, but unfortunately came to the conclusion that this was not a possibility for junior doctors' contracts. NHS Employers and the Government continue to urge the BMA's Junior Doctors' Committee to return to negotiations to achieve the best outcome for junior doctors and for patients.

On 30 September the Secretary of State for Health met with Dr Johann Malawana, Chair of the BMA's JDC, to discuss the junior doctors' contract. Following that meeting the Secretary of State wrote a letter to Dr Malawana (which I have set out on my website) setting out the Government's approach to the introduction of a new contract.

The BMA Consultant Committee has agreed to re-enter negotiations on the reform of the consultants' contract – this negotiation process is ongoing.

The Government's implementation timetable remains clear:

- The introduction of a new juniors' contract from the August 2016 intake.
- Early implementation of new terms for new consultants from April 2016 (moving existing consultants across by 2017)

### ***NHS Employers have made the following points with respect to this matter:***

- **“There is consensus that the current junior doctors' contract is not fit for purpose.”** In 2013 NHS Employers and the BMA published draft Heads of Terms to work towards implementation of a new contract for doctors in training; both sides agreed that the contract needed to be modernised. Our intentions are to introduce a new contract that improves:
  - **Patient safety through improved limits on working hours;**
  - **The quality of training for junior doctors;**

- **The pay system – with pay linked more fairly to work being done and the hours being worked and to reward those doctors who work the most unsocial hours.**

Our aim is to have a new contract which is safe, fair, affordable and fit for purpose. The current contract has a number of unfair aspects – for example, some doctors continue to receive an incremental pay increase each year even though they are not progressing through training grades; a doctor working 47 hours a week can be paid exactly the same as one working 41 hours a week; and a doctor working 9-6 Monday – Friday can be paid the same as a doctor working shifts 24/7.

The Government plans to end the unfairness in pay progression by linking increases to achievement and completion of stages of training, not purely time served. Successful completion of stages in training will in future be properly rewarded as pay rises will be linked to progression through the training grades and levels of responsibility. At the same time, doctors that take time out of training will continue to be entitled to 12 months maternity leave and the existing maternity payments.

- **We want to strengthen safeguards in the contract to enhance statutory protections.** This contract will not impose longer hours - working hour limits will be stricter than they are currently. The new contract and pay system will better protect junior doctors work life balance by making sure that there is a mutually agreed work schedule and review process with their employer. No junior doctor working full time will be expected to work on average more than 48 hours a week. There will be limits on the number of hours a doctor who opts out of the European Working Time Directive can work, and no doctor will have to work more than four consecutive night shifts. We need to look at how we ensure junior doctors are not exploited. Again, we had hoped to engage with junior doctors on the detail of these proposals.
- **This contract aims to strengthen patient safety.** We know that many doctors already work seven days a week. Building on this we want the new contract to support high quality, safe patient services across all days of the week. Our priority for delivering seven-day services is to adapt the contract for junior doctors (and the consultant contract) to enable improved service delivery and to ensure that doctors in training are properly supported.
- **This is not about cutting costs.** We are not looking to save money from the new contract and pay system. The overall amount of money linked to the pay bill for junior doctors' is not changing; average earnings will remain the same – as guaranteed by the Secretary of State for Health; there will be no question of the 30-40% pay cut as the BMA have claimed. In fact, we are proposing increases to basic pay. The Secretary of State for Health has asked us to develop a new contract to ensure that the great majority of junior doctors are at

least as well paid as they would be now. The key aim is to target pay elements towards those working the most hours or the most unsocial hours, as well as focussing on maintaining the ability to recruit and retain doctors' to specialities where there are currently shortages.

- **There is no contract ready to be imposed upon doctors.** Final decisions have not yet been taken on some key issues –we had hoped to engage with junior doctors to make sure we get some of these decisions right. For example, the Government has made clear that it is willing to discuss in negotiations how far plain time working extends on Saturdays. We had hoped that the BMA Junior Doctors Committee would enter into negotiations over the proposals for junior doctors' contracts, as the BMA's Consultants' Committee is doing, on the reform required to the consultant contract. Until now, the BMA JDC has refused to re-enter negotiations. Our opinion remains firmly that the best deal for junior doctors will be achieved by the BMA JDC returning to negotiations.”

***The role of NHS Employers has been outlined as follows:***

“NHS Employers aims to be the authoritative voice of workforce leaders and experts in HR, and to negotiate fairly to get the best deal for patients. NHS Employers agrees a mandate with the Department of Health to negotiate and manage changes to consultant and junior doctor contracts for employers.

NHS Employers is working to ensure employers in the NHS have the tools and resources needed to effectively implement both a new consultants' and new junior doctors' contract within these timescales.”