BMA

England

A charter for staff and associate specialist and specialty doctors

NHS Health Education England

NHS Employers

ACADEMY OF MEDICAL ROYAL COLLEGES

British Medical Association
bma.org.uk

Background

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This Charter sets out what SAS doctors can expect from their employers and employers can expect of them.

It also sets out the objectives and the support mechanism that Health Education England (HEE) promotes and provides through individual Local Education Training Boards (LETBs) and Local Education Providers (LEPs).

Originally a 2004 BMA document, it has been updated to reflect subsequent changes to national contracts and to education and training, jointly with the Academy of Medical Royal Colleges, HEE and NHS Employers. Joint Local Negotiating Committees (LNCs) are requested to commit to using the charter to help provide an optimum working environment for this valuable group of doctors.

BMA Scotland and the Management Steering Group have a separate Charter for Scottish SAS doctors.

SAS Doctors

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The NHS employs a significant number of doctors and dentists who are neither consultants nor trainees.

This important group of senior doctors and dentists is comprised of specialty doctors, associate specialists, staff grades, hospital practitioners, clinical assistants, senior clinical medical officers and clinical medical officers. This group of staff is referred to as the Staff, Associate specialists and Specialty doctors (SAS) group. SAS Doctors play an important role in NHS service delivery. In recent years an increasing number of doctors have chosen to become SAS Doctors rather than enter higher specialty training. Due to the evolving demographic of the medical workforce this trend may continue in future years.

SAS Doctors are confident and competent healthcare professionals, delivering clinical services in partnership with medical consultants and other health workers. They make significant contributions to the advancement of medicine and the profession in areas of leadership, education, research and governance. They work in accordance with the requirements of the General Medical Council's Good Medical Practice. Patient safety and care is paramount for SAS doctors.

They participate in the processes of medical revalidation, appraisal and job planning. They are committed to Continuing Professional Development (CPD) in order to better serve their patients, and meet the specialty-specific requirements for CPD, by maintaining and developing knowledge and skills.

Employers in the NHS aim to provide a working environment which recognises the SAS group's diversity and their major contribution to patient care.

SAS doctors need support and resources to develop both personally and professionally. Employers in the NHS are committed to ensuring that the role of the SAS doctor is fully acknowledged and respected by management, colleagues and patients. Each SAS doctor should be able to work in an environment which nurtures development within the grade and is free from harassment, bullying and discrimination. It is the employer's responsibility to provide this. SAS Doctors should feel they are able to freely raise concerns about patient safety if they arise.

Recommendations

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The following recommendations are made to help deliver the aspirations set out in Section 2.

3.1 Ensuring patient safety and care

SAS doctors will carry out their duties, workload and work patterns to ensure patient safety and high quality care. SAS doctors will engage in revalidation, appraisal and job planning processes. They will carry out their duties with care and compassion in compliance with GMC guidance and locally agreed policy and procedures.

3.2 Recognition for the SAS group

All LNCs should have membership that proportionally represents the medical workforce of the organisation. This should take into account different staff groups including SAS doctors to fully represent the local characteristics of the workforce.

3.3 Minimum conditions

Every SAS doctor should have the following conditions as a minimum:

a. Appropriate Contract, Job Plan and activities

- A contract of employment which, where appropriate, incorporates national terms and conditions.
- An appropriate mutually agreed job plan specific and relevant to their role. This can only be changed by mutual agreement between the SAS doctor and the Clinical Director/ Clinical Line Manager (in accordance with the local procedure for job plan reviews), taking into consideration any recommendations following appraisal. This should be reviewed annually. Any disagreements should be subject to mediation and appeal in accordance with the terms and conditions.
- A job plan that contains appropriate SPA time for the role[1]. This may change over time and should be reviewed as appropriate. Recommendations of the relevant Medical Royal College may be considered. The terms and conditions for doctors on the Specialty Doctor or Associate Specialist (2008) contract state there should be a minimum of one SPA for full time doctors, however additional time may be required provided the need is established in the job plan. SPA time underpins Direct Clinical Care and may include amongst other things audit, CPD, local clinical governance activities, training, formal teaching, appraisal, job planning and research. As a doctor becomes more experienced and takes on a broader role the employer will need to keep all elements of the Job Plan under review. Employers should ensure that doctors have the support needed to enable them to meet the requirements of the second threshold and can progress in their career. Threshold two requires evidence of demonstrating a contribution to a wider role which may require reassessment of the balance between Supporting Professional Activities and Direct Clinical Care duties and allocations.
- Hours of work which are compliant with Working Time Regulations.
- Work commitments and scheduling which recognise the importance of an appropriate balance between daytime and out of hours work depending on specialty/individual job plan.
- An up to date appraisal and job plan. This can help provide evidence of a SAS doctor's current level of practice. It may, with the approval of the employer, include responsibility for patients, lists or clinics, or could specify any extra support the doctor may require.

[1] The contractual basis for those AS and Staff Grade doctors on the pre 2008 contracts consists of fixed/flexible sessions rather than Programmed Activities

– (for those on the pre-2008 contracts) Access to a fair and appropriate mechanism for the award of Optional Points for Staff Grades and Discretionary Points for Associate Specialists.

– Equal access to the benefits and responsibilities of the NHS Constitution or national equivalent in the devolved administrations.

b. Support

– Appropriate access to resources such as office accommodation and technology to enable SAS doctors to do their jobs effectively and efficiently. This may include email, other software packages, and suitable storage facilities for confidential work, related papers, books etc. Appropriate secretarial/admin support should be provided.

– Effective induction into their role and their location. Clear and effective reporting lines. These should be explained as part of local induction policy. Every employer should have a local Whistleblowing/Raising Concerns policy which the doctor should be made aware of.

– Appropriate IT support to ensure transparency of NHS data and provision of care as well as attribution of work to appropriate clinicians. This will include coding of patients and work activity under a SAS doctor's name where applicable, guidance on how to code appropriately and access to this data when required.

– Access to pastoral support (and specialist occupational health provision).

– Access to appropriate (and individualised where available) data for appraisal & revalidation.

– As per Academy of Medical Royal College Guidance on Taking Responsibility (June 2014), employers should ensure that where a SAS doctor is the clinician responsible for a patient's care this should be appropriately displayed. This will be in circumstances where senior SAS doctors have the expertise and ability to take responsibility for patients without consultant supervision.

c. Development

– Access to support and guidance relating to application for Certificate of Eligibility for Specialist Registration (CESR) should they wish it and support to apply for additional funding for personal and professional development activities where available. If CESR is achieved, this should be recognised and acknowledged in the same way as for new Certificate of Completion of Training (CCT) holders.

– Adequate support and time allocation to allow SAS doctors to fully participate in the employer's annual appraisal process including access to appraisee training (and appraiser training where applicable) and the necessary CPD and study leave requirements, which naturally arise from appraisal. SAS doctors should have the same access as their consultant colleagues to internal and external CPD activities and study leave time and funding.

– Organisations should ensure doctors have access to a SAS tutor (where available), clinical lead and a mentor for professional and personal development needs as well as appropriate support and time to learn new skills. SAS doctors may wish to undertake secondments and this will be considered in line with an organisation's local policy.

– Sufficient breadth and depth of clinical work and relevant professional activities to enable the SAS doctors to achieve and maintain relevant competencies and develop as clinicians.

– Accountability arrangements should be commensurate with the seniority of the practitioner. Local governance systems should consider BMA policy which supports appropriately skilled and experienced SAS doctors working autonomously. NHS Employers and the General Medical Council have confirmed that there is no contractual or regulatory impediment to SAS doctors working autonomously within defined local governance systems.

d. Involvement in organisational structures

– Encouragement and opportunities for interested senior SAS doctors to get involved in the management of their directorates and in wider corporate duties. All SAS doctors who meet the essential person specification for management posts in their organisation should be eligible for consideration.

– SAS doctors (permanent staff) should be members of the Medical Staff Committee/ Hospital Medical Board (where it exists) and should be invited to attend these and Directorate meetings and encouraged to do so where other commitments permit. Interested senior SAS doctors should also be supported in taking up academic positions.

– Access (in the same way as other colleagues) to time off for external, civic and trade union duties.

e. Recruitment

– Recruitment and appointment processes should be fair, open and effective.

– Job descriptions which define sessional commitments should be available at the point of application.

– SAS doctors should be involved in the recruitment of other SAS doctors.

Resources

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Funding to support the development of SAS Doctors in England was first made available by the Department of Health in 2008.

This funding is now allocated by HEE via the individual LETBs. This is additional to any defined study leave allocations within employing organisations.

The management and allocation of funding is currently distributed through LETBs in the following ways:

a. Funding is held centrally and managed by a nominated Associate Dean, who will liaise and work closely with the local LEPs.

b. Funds are devolved to local LEPs. LEPs will generally appoint SAS Tutors specifically to manage and support their SAS Doctors.

c. A combination of the above

This mechanism is at the discretion of individual LETBs, who will have transparent local processes supported by key stakeholders.

Roles

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5.1 The role of the Associate Dean

Most LETBs engage an Associate Dean to act as Lead for the management and support of SAS Doctors within the region. The Associate Dean will work closely with LEP based SAS Tutors to ensure that SAS doctors have an appropriate support mechanism in place during their employment.

Key responsibilities:

- Assist the LETB Senior Team with the dissemination of SAS training resources to local LEPs in a manner that is transparent, accountable, effective and meets the needs of SAS doctors
- Support the appointment, induction and appraisal of SAS Tutors within individual LEPs
- Provide career support to SAS Doctors, including those wishing to progress through the CESR pathway
- Organise regional events on topical issues of broad interest to SAS Doctors
- With administrative support, help to maintain regional SAS Doctor and Tutor records to ensure good communication and circulation of relevant information.

5.2 The role of the SAS Tutor (LEP based)

Each LEP which employs SAS Doctors is encouraged to identify an SAS Tutor. The SAS Tutor is the first point of contact for all SAS Doctors and is there to support and offer advice and guidance on career related issues, education and development and the use of SAS funding at a local level.

Key responsibilities:

- Develop effective working relationships within the LEP
- Develop communication mechanisms with the LETB, particularly the Lead Associate Dean for SAS Doctors
- Provide support and guidance for all SAS Doctors within the LEP
- Provide advice to LEPs on the most effective use of educational resources
- Be aware of both local and national policies and processes relating to SAS Doctors

Further Resources

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SAS UK Job Planning Guidance – http://bma.org.uk/jobplanningsas

SAS terms and conditions of service – http://www.nhsemployers.org/your-workforce/pay-and-reward/nhs-terms-and-conditions/specialty-and-associate-specialist-doctors

BMA guidance on autonomy for SAS doctors – http://bma.org.uk/sasdoctorsautonomy

The NHS Constitution – http://www.nhs.uk/choiceintheNHS/Rightsandpledges/NHSConstitution/Pages/Overview.aspx

Guidance for Taking Responsibility: Accountable Clinicians and Informed Patients – http://www.aomrc.org.uk/doc_view/9765-taking-responsibility

GMC guidance on CESR qualification pathway – http://www.gmc-uk.org/doctors/registration_applications/ssg.asp

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