

## Guidance for Divisions on Junior Doctors Contract 2016

### Introduction

The new Terms and Conditions of Service for NHS doctors and Dentists in Training came into effect on 3<sup>rd</sup> August 2016. The contract was introduced for all doctors in approved training posts and has a phased implementation starting from October 2016. The first doctors in Blackpool moved across to the 2016 Terms and Conditions (TCS) are from 7<sup>th</sup> December 2016. From August 2017, three quarters of the trainees at Blackpool will be on the 2016 TCS.

### Implementation schedule

The phased implementation schedule as shown here is a national schedule. Trainees will only move over to the 2016 TCS once their current contract expires. This means that for most divisions they will have a mix of trainees on the old contract and trainees on the new.



Implementation  
timeline July 2016.pdf

### Building rotas and work schedules

All trainees can work on the same rota whether they are on 2002 New Deal TCS or the 2016 TCS. Rota coordinators, working with the Trainee Doctors Support Team (TDST) have designed rota templates to ensure compliance with both contracts. These rota templates are held by the TDST and issued to trainees prior to starting as per the code of practice deadlines



Code of Practice  
2016 England.pdf

To make a change to an existing template, the attached process must be followed by the division.



Guidance 'How to  
Change a Rota Templ

The process is different for trainees on the New Deal 2002 TCS and trainees on 2016 TCS. It is also different when changes are to be made that affect trainees already here or new trainees who have not yet started. Divisions can get further guidance on this process by liaising with the TDST but please see the enclosed flow chart.



Sign Off Flowchart  
(as of 01.08.17).doc

Once this process has been followed the new templates will be shared with the trainees by either the TDST (for 2016 TCS) or the rota coordinator (for 2002 TCS).

Once agreed the rota will be used to form part of the work schedule. Work schedules are issued to each doctor in training prior to commencement at the trust.

**Please note that once work schedules have been issued to trainees, it is important that the correct process is followed to make changes. Trainees can appeal against changes made especially if the process is not followed via the trust grievance procedure.**



Guidance on Work  
Schedules for Educati

### **Maintaining the work schedule**

It is vitally important that the rotas designed by the rota coordinator are not only compliant on paper but are also workable in practice. For example, if trainees are expected to work in theatre every Thursday and the session never ends before 6pm they should not be rostered to work until 5pm as per other days. The 2016 TCS are set up so that the doctors are paid for all hours worked. Therefore if they do not work the work schedule they are given they will be incorrectly paid.

The work schedules will be reviewed at the start and finish of a placement by the trainee and their Educational/Clinical supervisor. If the duties, responsibilities, training

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opportunities, accountability arrangement or objectives have changed significantly, or need to change significantly then the supervisor will make recommendations for changes. This needs to be discussed and agreed with the division. If it is not possible to reach agreement or achieve the agreed outcome the doctor may request a formal work schedule review.

### **Exception Reporting**

The work schedule that the trainee is issued should include the rota that they regularly work. If the trainee feels that the work schedule does not reflect what they actually work they are encouraged to put in an exception report as per the guidance attached.



Guidance on  
Exception Reporting 1

Each time a decision is made to change a trainee's work pattern there is a risk that the trainee will complete an Exception Report. If the trainee is required to miss breaks or work longer than they are rostered to work they may put in an exception report. All exceptions have to be investigated and penalties can be allocated to divisions for any breaches in EWTD. Continuous exceptions from any area would result in a work schedule review as described above.

There may be a requirement to request trainees to change their rostered shifts in response to an immediate safety concern regarding safe working and rota gaps. Each change needs to be considered carefully before action is taken and rota coordinators need to be confident that the change will not result in a breach of EWTD. If it is likely to do so then authorisation must be required first as there will be a financial penalty incurred.

The investigation of Exception Report and Work Schedule reviews are a very time consuming process which will involve numerous parties including the rota coordinator, Educational leads, Directorate Managers, Medical Education, HR and the Guardian of Safe Working. Therefore divisions are encouraged to look at other ways of filling gaps in rotas rather than using the trainees on 2016 TCS. The trainees who have completed an opt-out form for EWTD may be available to work additional hours. EWTD limits trainees to working 48 hour per week but opting out enables doctors to work up to 56 hours per week and

details on these trainees are available from the Trainee Doctor Support Team. Any additional hours allocated would still need to be approved using the divisional procedure and assurance must be given by the Rota coordinator when booking the trainee that they will not breach EWTD by doing so. Penalties would be allocated for any breaches.

### **The role of the rota coordinator in exception reporting**

The Educational/Clinical Supervisor of the trainee will be required to investigate all exception reports. This may mean they will need to liaise with the rota coordinator to understand the hours worked by the trainees. Once the investigation has been completed there will be a recommendation made by the supervisor which may require Time off in Lieu or an additional hours payment. The ES/CS have been advised that the TOIL option is the preferred one. This would be used where safe working hours are threatened by an extension of working hours. If the additional hours have caused a breach of rest requirements then time off in lieu must be taken within 24 hours unless the doctor self declares as fit for work and the manager agrees. Before Supervisors agree to additional hours payment they must first discuss this with the division, additional hours paid from exception reports are paid at basic rate (not locum rate). The trainee is advised to provide the rota coordinator with the recommendation for action.

### **Weekly Reports**

It is a requirement of the 2016 TCS that the GOSW provides a report for the Board on all Exception Reports and rota gaps along with a plan to address them. This will mean that the GOSW will need to work closely with divisions to understand their rota gaps. Rota coordinators will be asked to provide information on gaps and any changes they have made. The Trainee Doctor Support Team is available to support divisions in the implementation of the contract and to offer advice and help around all elements of the contract. Divisions are encouraged to contact them as and when needed.

## Help and Support for Divisions

Name	Role	Email address	Extension
Trainee Doctor Support Team	Trainee Doctor Support Team	<a href="mailto:TraineeDoctorSupportTeam@bfwhospitals.nhs.uk">TraineeDoctorSupportTeam@bfwhospitals.nhs.uk</a>	53646
Nicola Di-Vito	Trainee Doctor Support Team/Revalidation Manager	<a href="mailto:Nicola.Di-Vito@bfwhospitals.nhs.uk">Nicola.Di-Vito@bfwhospitals.nhs.uk</a>	57256
Laura Davey	Postgraduate Manager	<a href="mailto:Laura.davey@bfwhospitals.nhs.uk">Laura.davey@bfwhospitals.nhs.uk</a>	53032
Dr Chris Dunkley	Guardian of Safe Working	<a href="mailto:Dr.Dunkley@bfwhospitals.nhs.uk">Dr.Dunkley@bfwhospitals.nhs.uk</a>	53499
Guardian of Safe Working Office	GOSW Administration Support	<a href="mailto:GOSW@bfwhospitals.nhs.uk">GOSW@bfwhospitals.nhs.uk</a>	53288