



THE SCOTTISH OFFICE

National Health Service in Scotland Management Executive

COMMON SERVICES AGENCY

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14 FEB 1994

NHS
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St. Andrew's House
Edinburgh EH1 3DG

ACTION
INDEX

Dear Colleague

INTRODUCTION OF COMPULSORY INDUCTION COURSES AND CHANGING THE STARTING DAY FOR HOSPITAL MEDICAL AND DENTAL STAFF

11 February 1994

Summary

1. This Circular introduces as from August 1994 a requirement for induction courses, approved by the Postgraduate Dean, to be held for newly qualified hospital medical and dental staff, and for those joining another hospital or moving to a new specialty.

2. In order to facilitate this, the Circular also sets a new starting day, the first Tuesday in August, for newly qualified Pre-Registration House Officers (PRHOs) and dental House Officers (HOs) and the first Wednesday in August for Senior House Officers (SHOs) on first appointment.

3. Similar arrangements are being introduced in England, Wales and Northern Ireland.

Action

4. Health Boards and Trusts should prepare educationally approved induction courses for new PRHOs and dental HOs in consultation with Postgraduate Deans and the local consultants and managers in each provider unit. Trusts and Directly Managed Units should prepare contracts with the new starting date(s).

5. The effect will be that doctors taking up their first pre-registration posts and dental HOs taking up their first posts will be required to attend an induction course in their new hospital on the first Tuesday in August (ie their start date for employment purposes). Similar arrangements have been agreed for the few newly qualified PRHOs and dental HOs who will start employment in February. These new arrangements should not prejudice any existing successful induction courses which are currently in place and have been approved by the Postgraduate Dean.

6. Appropriate induction courses should be offered to all those entering each of the training grades for the first time.

Addressees

For action:

General Managers,
Health Boards

Chief Executives and
Chief Executive
Designates NHS Trusts

Postgraduate Deans and
Directors

For information:

General Manager,
Common Services Agency

General Manager,
State Hospital

Executive Director,
SCPMDE

General Manager, HEBS

To be copied to Unit
General Managers for
action.

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7. Pre-registration employment will continue to be not less than the period of 12 months envisaged in the 1951 GMC Regulations. These new arrangements will begin in August 1994, when the starting day for new PRHOs and dental HOs will be Tuesday 2 August. PRHOs and dental HOs already in post, who would previously have moved on 1 August, will continue in their present positions up to and including 2 August. They will therefore take up their new posts on Wednesday 3 August 1994. This overlap will ensure that the PRHOs and dental HOs completing their service will still be in post when the new PRHOs and dental HOs are attending induction courses, thus ensuring the provision of suitable cover arrangements. The arrangements for those newly qualified PRHOs and dental HOs who commence in a February will be effective from 1995.

8. Existing SHOs should continue in their present posts and change over on 3 August 1994 and on 1 February in 1995.

9. Details of the new arrangements including the revised start dates for PRHOs and dental HOs (covering the next 10 years) are outlined in the Annex.

10. This letter should be copied to Unit General Managers for action.

Yours sincerely



A J MATHESON
Director of Manpower

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ANNEX

INTRODUCTION OF COMPULSORY INDUCTION COURSES AND CHANGING THE STARTING DAY FOR HOSPITAL MEDICAL AND DENTAL TRAINING POSTS

OUTLINE OF THE NEW ARRANGEMENTS

Introduction

1. Those hospitals receiving newly qualified house officers are required to offer an induction programme, involving both the local consultants and representatives of the hospital management. Appropriate arrangements should be made for newly qualified doctors and dentists commencing their first post in February.
2. Where more experienced doctors and dentists are joining a new hospital, an induction programme should also be arranged as appropriate to their seniority. This may be undertaken during lunch-time/early evening periods if an allocation during the working day cannot otherwise be arranged.
3. Induction programmes for PRHOs and dental HOs, approved by the Postgraduate Dean, should cover not only management issues, but also professional concerns, for example, death certification, breaking bad news, keeping GPs informed of their patients' progress etc. Many hospitals already offer such programmes, and some have been described in the literature (BMJ 1992; 304: 1619-20). The recent Standing Committee on Postgraduate Medical Education report "Induction Programmes for Hospital Medical and Dental Staff in Training" is recommended. It is vital that local consultants, as well as the Postgraduate Dean, are involved in the planning of these programmes, and that consultants participate in them. General Practice Advisers may also be invited to contribute.
4. Induction courses for more senior doctors and dentists are just as important, but may need to cover different topics. As this group of doctors and dentists is not likely to be available for a day-long course on the day prior to commencing their new post, hospitals are expected to arrange appropriate lunch-time or early evening meeting(s) to deal with local policy and arrangements. Again, consultants as well as administrators, and where appropriate general practice trainers/course organisers, are expected to participate.
5. Specific arrangements should be made for a comprehensive handover for new post-holders at all grades. Consultants should expect to have more contact with their new staff while they become familiar with patients already under the care of the team. Time should be allowed for the completion of any necessary administrative or residential details.
6. There has been considerable concern for some time over the starting dates for newly qualified doctors and dentists, particularly when these occur at a weekend. The quality of patient care may be reduced where relatively inexperienced doctors such as newly appointed PRHOs or SHOs find themselves responsible for a new group of patients, as well as emergency admissions, in an unfamiliar hospital, with fewer colleagues immediately available. The revised starting day should avoid these problems and also ensure that patients admitted as emergencies over the

previous weekend have an investigation and treatment plan established before the changeover.

7. These new arrangements should not prejudice any existing successful induction courses which are currently in place. However they should be approved by the Postgraduate Dean.

Main Features of the New Arrangements

8. From August 1994, newly qualified PRHO and dental HO appointments will commence on the first Tuesday of August (this day will be set aside for induction programmes and handover) and PRHOs and dental HOs completing their service will continue in post up to and including the first Tuesday in August; similar arrangements should be set in place for those newly appointed PRHOs and dental HOs who commence in February, effective from 1995.

9. Where a trainee is moving immediately to a new post located at some distance from their current post, every effort should be made to ensure that the trainee is not required to work during the evening/night of the change-over period.

10. If trainees, in the course of their duties, will be expected to participate in out-patient or theatre sessions, consultants are expected to reduce the size of the first of these commitments to occur after a new trainee joins the team. This will allow time for the new doctor to "remain with" the consultant on this occasion, enabling the consultant to explain his/her policies, and to make an initial assessment of the trainee.

11. All hospitals should prepare written information to be sent to trainee doctors and dentists prior to their taking up each new appointment. This should include information about the hospital and layout facilities, as well as details specific to the new post itself, such as the individual's timetable and the expectations of the consultants for someone in that grade. It should also deal with policy issues, for example: on initiation/change of treatment, what level of responsibility is to be expected from the appointee, which member(s) of the team discusses diagnosis, treatment and prognosis with patients, and who is responsible for discharge letters.

Revised Start Dates

12. The new arrangements, which will commence in August 1994, are as follows (dates shown cover the next 10 years). The dates shown in brackets below are the relevant start dates for newly qualified PRHOs and dental HOs who would previously have commenced on February 1:

Tuesday 2 August 1994 to Tuesday 31 January 1995
Wednesday 1 February 1995 to Tuesday 1 August 1995
(Tuesday 31 January 1995)

Tuesday 1 August 1995 to Tuesday 6 February 1996
Wednesday 7 February 1996 to Tuesday 6 August 1996
(Tuesday 6 February 1996)

Tuesday 6 August 1996 to Tuesday 4 February 1997
Wednesday 5 February 1997 to Tuesday 5 August 1997
(Tuesday 4 February 1997)

Tuesday 5 August 1997 to Tuesday 3 February 1998
Wednesday 4 February 1998 to Tuesday 4 August 1998
(Tuesday 3 February 1998)

Tuesday 4 August 1998 to Tuesday 2 February 1999
Wednesday 2 February 2000 to Tuesday 1 August 2000
(Tuesday 2 February 1999)

Tuesday 3 August 1999 to Tuesday 1 February 2000
Wednesday 2 February 2000 to Tuesday 1 August 2000
(Tuesday 1 February 2000)

Tuesday 1 August 2000 to Tuesday 6 February 2001
Wednesday 7 February 2001 to Tuesday 7 August 2001
(Tuesday 6 February 2001)

Tuesday 7 August 2001 to Tuesday 5 February 2002
Wednesday 6 February 2002 to Tuesday 6 August 2002
(Tuesday 5 February 2002)

Tuesday 6 August 2002 to Tuesday 4 February 2003
Wednesday 5 February 2003 to Tuesday 5 August 2003
(Tuesday 4 February 2003)

Tuesday 5 August 2003 to Tuesday 3 February 2004
Wednesday 4 February 2004 to Tuesday 3 August 2004
(Tuesday 3 February 2004)

Financial Implications

13. All doctors and dentists working during July 1994, but expecting to change jobs on 1 August, will be required to continue in their present posts for an additional 2 days. While this will have only minor funding implications for the service, it will affect the salaries of those doctors and dentists due to change grade, and those whose incremental date is 1 August. These individuals will lose 2 days of their increment in 1994, as incremental dates will be delayed until the commencement of their new posts. The Scottish Office Pensions Agency advise that there will be no effect on retirement pensions. The basic salary costs of PRHOs and the other training grades are met from April 1994 by SCPMDE under the arrangements set out in MEL(1993)149.

14. The induction courses for PRHOs and dental HOs taking up their first appointment will be the financial responsibility of the Trust or DMU. In practice it is likely to be mainly Trust or DMU staff who will be providing the induction courses.

