Dear Colleague

PAY AND CONDITIONS FOR HOSPITAL MEDICAL AND DENTAL STAFF AND DOCTORS AND DENTISTS IN PUBLIC HEALTH MEDICINE AND THE COMMUNITY HEALTH SERVICE

RATES OF PAY FOR LOCUM APPOINTMENTS FOR SERVICE IN THE SPECIALTY REGISTRAR GRADE; AMENDMENTS TO TERMS AND CONDITIONS OF SERVICE AND GUIDANCE ON PAY ON RETURN TO TRAINING FOR DOCTORS IN CAREER GRADES

Summary

1. This pay circular notifies employers of rates of pay for Locum Appointments for Service in the Specialty Registrar grade, of amendments to Terms and Conditions of Service (TCS) for Hospital Medical and Dental Staff and Doctors and Dentists in Public Health Medicine and the Community Health Service to reflect the new training grades, and offers guidance on pay on return to training for doctors in career grades.

Agreement

2. The Joint Negotiating Committee (Juniors) have approved rates of pay for Locum Appointments for Service (LAS) in the Specialty Registrar grade. The rates are set out in Annex A to this Circular.

3. Agreement has also been reached on amendments to TCS to incorporate references to appointments in the grades of Foundation House Officer 1 and 2, and Specialty Registrar appointments in both programme and fixed-term appointments. References to the closed grades of Registrar and Senior Registrar have been removed.
Locum Pay

4. In applying the locum rates employers should take full account of the level of service cover required, as they would have done in the past with mixed SHO/SpR rotas. The lower rate is payable where the locum is covering a doctor working at levels ST1 or ST2. In all other cases the higher rate will be appropriate.

Guidance on pay on return to training

5. Annex B expands on the information given in NHS Pay Circular PCS(DD)2007/7 and gives examples of the assessment of pay on return to training for practitioners re-entering training from a career grade.

6. Employers should note that changes made to paragraph 132a of TCS in NHS Pay Circular PCS(DD)2007/7 inadvertently excluded references to practitioners in a training grade who take up an appointment in a lower training grade. This was an oversight, and until the text of the paragraph in the TCS is amended, where a practitioner moves from a higher training grade to a lower grade as determined by the maximum point of the basic pay scale, the practitioner shall, while in the lower grade, continue to be paid on the incremental point, pay point or threshold the practitioner had reached in his or her previous appointment. Such a practitioner shall receive the benefit of any general pay awards. On reappointment to the higher grade or on appointment to another higher grade, the practitioner’s starting salary should be assessed as if the period spent in the approved training post had been continuing service in the previous higher grade.

Amendments to TCS

7. The text of the TCS has been amended to add references to Foundation House Officers and Specialty Registrars, and to remove references to Registrars and Senior Registrars. These amendments are nominal only and do not affect any existing entitlements.

8. Where practitioners are still employed in the Registrar or Senior Registrar grade, action should be taken to move these to an appropriate current grade, as the pay scales for these grades will be deleted from Pay Circulars with effect from November 2007.

9. A copy of the amended TCS incorporating these changes and also changes to maternity leave and pay arrangements, parental and carers leave provisions and flexible working arrangements is being issued to NHS Scotland under cover of NHS Circular PCS(DD)2007/10.
Action

10. NHS Boards, Special Health Boards and NHS National Services Scotland are required to make the necessary arrangements to implement, and where necessary, retrospectively apply the new salaries and arrangements as notified in the Annexes to this Circular in full with effect from 1 August 2007 as appropriate.

Enquiries

11. Employees should direct their personal enquiries to their employing NHS Board or Special Health Board.

12. NHS Employers are asked to make their own arrangements for obtaining any additional copies of this circular. This circular can be viewed on http://www.show.scot.nhs.uk/sehd/pcs.asp.

Yours sincerely

ALEX KILLICK
Deputy Director for Health Workforce
Employment and Retention
DIRECTION

The Cabinet Secretary for Health and Wellbeing, in exercise of the powers conferred on her by Section 105(7) of, and paragraph 5 of Schedule 1 and paragraph 7 of Schedule 5 to, the National Health Service (Scotland) Act 1978, hereby give to NHS Boards and Special Health Boards and NHS National Services Scotland the following Direction:

Hospital medical and dental staff and doctors and dentists in public health medicine and the community health service shall be paid the appropriate rates relating thereto which were approved by the Cabinet Secretary for Health and Wellbeing on 17 August 2007 in NHS Circular PCS(DD)2007/9 with effect from 1 August 2007.

ELINOR MITCHELL
Deputy Director
Health Workforce Directorate
Scottish Executive
Health Directorates
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EDINBURGH
EH1 3DG
17 August 2007
NATIONAL HEALTH SERVICE
APPROVAL OF REMUNERATION AND CONDITIONS OF SERVICE

The Cabinet Secretary for Health and Wellbeing, in exercise of the powers conferred on them by regulations 2 and 3 of the National Health Service (Remuneration and Conditions of Service) (Scotland) Regulations 1991 hereby approve the agreement of the Joint Negotiating Committees to the amendments to the Handbook of the Terms and Conditions of Service for Hospital Medical and Dental Staff and Doctors and Dentists in Public Health Medicine and the Community Health Service, set out in Annexes A and B to NHS Circular PCS/DD2007/9.

This approval has effect from 1 August 2007.

ELINOR MITCHELL
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17 August 2007
ANNEX A

Specialty Registrar and Specialty Registrar (FT):

<table>
<thead>
<tr>
<th>Band</th>
<th>Working Arrangement</th>
<th>Supplement</th>
</tr>
</thead>
<tbody>
<tr>
<td>LA</td>
<td>Outside Monday to Friday 9am to 5pm for shift working patterns</td>
<td>1.8 x basic hourly rate</td>
</tr>
<tr>
<td>LB</td>
<td>Outside Monday to Friday 9am to 5pm for on-call working patterns</td>
<td>1.5 x basic hourly rate</td>
</tr>
<tr>
<td>LC</td>
<td>Monday to Friday 9am to 5pm for all working patterns</td>
<td>1.4 x basic hourly rate</td>
</tr>
<tr>
<td>LL</td>
<td>Covering a post for one week or more</td>
<td>1.2 x total salary (basic salary + banding supplement)</td>
</tr>
</tbody>
</table>

### Hourly Rates (£) : Bands LA, LB, LC

<table>
<thead>
<tr>
<th>Band</th>
<th>Basic Rate</th>
<th>LC</th>
<th>LB</th>
<th>LA</th>
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</thead>
<tbody>
<tr>
<td>StR (lower rate)</td>
<td>15.87</td>
<td>22.22</td>
<td>23.81</td>
<td>28.57</td>
</tr>
<tr>
<td>StR (higher rate)</td>
<td>17.51</td>
<td>24.52</td>
<td>26.27</td>
<td>31.52</td>
</tr>
</tbody>
</table>

### Weekly Rates (£) : Band LL

<table>
<thead>
<tr>
<th>Band</th>
<th>Basic Rate</th>
<th>1C</th>
<th>1B</th>
<th>1A</th>
<th>2B</th>
<th>2A</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>StR (lower rate)</td>
<td>761.32</td>
<td>913.59</td>
<td>1065.85</td>
<td>1141.98</td>
<td>1141.98</td>
<td>1370.38</td>
<td>1522.64</td>
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<tr>
<td>StR (higher rate)</td>
<td>840.36</td>
<td>1008.44</td>
<td>1176.51</td>
<td>1260.54</td>
<td>1260.54</td>
<td>1512.65</td>
<td>1680.72</td>
</tr>
</tbody>
</table>

(NB: Junior doctors in Locum Appointment for Service (LAS) posts are to be paid under the banding system above. Junior doctors in Locum Appointments for Training (LAT) are excluded from this arrangement).
EXAMPLES OF PAY ON RETURN TO TRAINING

General Principles

Pay on return to training is based on the premise that doctors returning to training from substantive career grades will retain the basic salary they were receiving before re-entering training, excluding any additional sessions, notional half days or programmed activities above the basic contract. Work carried out as a trainee will be paid for on the same basis as if the work had been carried out under the career grade contract. No trainee banding supplement will be payable.

The new arrangements will apply to all posts contracted for on or after 1 August 2007 regardless of the date of re-entry to training. Doctors already paid or contracted under the previous arrangements before 1 August 2007 will continue to be so paid until the end of any currently contracted posts.

The examples given use notional salaries for the sake of clarity.

1. A staff grade doctor returning to training

On return to training the staff grade doctor has their basic salary point on their original contract protected, and while in training will continue to receive annual pay awards but will not move up the incremental scale. Additional work necessary to carry out the training duties is then paid for using additional sessions under the terms of their original staff grade contract.

Consider for the purposes of illustration a staff grade doctor who before re-entering training earned £40,000 for a basic 40 hour working week with £4,000 for one additional session giving a total salary of £44,000.

Protected basic salary on return to training is £40,000 – the additional session in the original post is not protected.

In the training post they now work full shifts for an average 48 hour week i.e. basic contract plus 2 additional sessions. Under the proposals he/she will now earn £48,000 receiving £4,000 p.a. for each additional session worked in the average working week.

If the duty has an element of on-call, the provisions of PCS(DD)1997/5 allow for on-call work to be included within the basic 40 hours/10 sessions; if duty over and above 40 hours is required, additional sessions may be paid according to the intensity and resident/non-resident nature of the work.
2. **An associate specialist doctor returning to training**

Using the same scenario consider an Associate Specialist returning to training who before re-entering training earned £55,000 for a basic 38.5 hour week with £5,000 for one temporary additional Notional Half Day (NHD) giving a total salary of £60,000. The example assumes all hours worked are in standard hours and gives a session rate of £5,000 p.a.

Their protected salary is £57,143 – the 40 hour equivalent of the AS contract which was based on a 38.5 hour week.

If in the training post they work an average 48 hour week they would earn £68,571. This is made up of £57,143 for a 40 hour week in the training post plus £11,429 p.a. for the additional 8 hours worked in the average working week (made up of 2.29 NHD’s). In addition, NHDs or fractions thereof may be contracted for where the employer considers the duties to be particularly onerous. This approach might be used to reflect out-of-hours or on-call duties. Application will reflect normal practice in the use of the national contract provisions in the NHS Board, Special Health Board or NHS National Services Scotland.

3. **A consultant returning to training**

Consider a consultant who earned £75,000 before entering training for a basic 40 hour week with £7,500 for one extra Programmed Activity (PA) giving a total salary of £82,500. The example starts by assuming all hours worked are in standard hours.

Their protected salary on return to training is £75,000 – the additional PA in the original post is not protected.

In the training post they now work an average 48 hour week (not at premium time) i.e. basic contract plus 2 additional PAs worked in the average week, earning £90,000 as a total salary.

If part of the 48 hours is in premium time, total pay might be calculated on the basis of four hours pay for each three hours of premium time. If in the previous example an average of 12 hours a week fell in premium time, the doctor would be paid an additional 4 hours making a total of three additional PAs and a total pay of £97,500. Application of these provisions will depend on normal practice in the use of the consultant contract in the employing NHS Board or Special Health Board.

Where the doctor is required to take part in an on-call arrangement, the appropriate availability supplement should be applied to their basic salary in addition.
General

The calculation of additional payment for out-of-hours work carried out by career grade practitioners in all grades should follow existing practices in the employing NHS Board or Special Health Board to ensure equity of application between those practitioners in training and their colleagues on the same grade holding regular appointments.

SEHD
August 2007