Applying for a consultant post
What you need to know
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Introduction and key points

When applying for any job, most people take into account factors such as location, facilities and transport links. But the most important consideration is the job and the contract that provides its structure. All new consultant posts are now based on the 2003 consultant contract. Since it was introduced, the contract has been recognised as bringing significant benefits and this reflects the success with which it has balanced the need to retain the professionalism of the consultant role whilst ensuring that consultants are properly paid for all the work they do. In the current competitive climate we are aware that some trusts are considering making changes to the model contract that has worked so well since its introduction. This is a major concern and applicants need to be aware of what they should expect as part of their contract and what to do if these expectations aren’t met.

This guide is aimed mainly at those who are applying for their first consultant post but it is also useful for existing consultants who are considering moving to a new post. It sets out what you should expect from your contract, why it is important and where to get support if you need it. To make the best out of your contract you should:

- Check what you are agreeing before agreeing it
- Read and understand the relevant documentation
- Know that the BMA can support you through every step of the process
- Consider the job plan carefully – does it match the job and your career goals?
- Keep a workload diary for representative periods when in post

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The following are the officially agreed documents which stem from the 2003 contract agreement. They are updated from time to time as the result of negotiations between the BMA and NHS Employers. They are available on the NHS Employers website here:


- Terms and conditions of service
- The model contract
- Job planning guidance
  - Joint DH/CCSC best practice
  - Private practice code of conduct
- Part-timers guidance

The BMA has issued a great deal of guidance and supporting documentation since the contract was agreed. We recommend that all consultants and Local Negotiating Committees (LNCs) consider relevant BMA guidance prior to entering any discussions with management.

Documents making up the contract

- Terms and conditions of service as nationally published
- Contract – usually written as a letter, should be based on the national model
- Job Plan – often the job description serves as the job plan until after a review
- Schedule of activities – usually in job plan or job description and describes your working weekly timetable
Preparing to apply for a job

Adverts
Many job adverts are written with little detail about the terms and conditions that will govern your working life. The NHS Jobs website www.jobs.nhs.uk contains what amounts to expanded adverts but it also has loaded onto it the job description and other documents. The job description is the central document, describing the contract that the successful candidate will have with the employer. You should read this in conjunction with the advice given below.

Job descriptions
These documents usually contain a variety of information from the very general to the very specific. General information will usually include descriptive information about the hospital, the medical school if appropriate, the local environment and so on. Much of this will amount to promotional material. The specific information you need is about the working conditions and should include elements from the job plan though it does not always do so – check it carefully.

A good job description for a consultant post should contain some explanation of the following:

- Balance of Direct Clinical Care (DCC) to Supporting Professional Activities (SPA) (7:5:2:5 PAs as a model for consultant posts)
- A proposed weekly schedule (although this can be changed)
- Time and location details
- A description of how other contracted time should be used (e.g. on call, SPAs)
- Number of programmed activities (10 for a full time post)
- On call recognition
- Supporting resources such as secretarial staff, office space, IT equipment
- Local variations e.g. Additional Programmed Activity (APA), SPA location
- Purpose of the post and objectives of the consultant
- Treatment of private practice and pay progression
- Essential skills
- Desirable skills.

You should always check with the trust’s human resources department, the LNC (Local Negotiating Committee) or the BMA’s contract checking service for details of local policies and procedures. These are normally negotiated with the LNC and will apply to consultants employed at the trust. National terms and conditions of service cannot be negotiated away without your explicit agreement. Contact the BMA for specific advice if you are concerned about any of the terms or conditions of service, or trust policies.
Expenses
You may be able to claim expenses for costs in attending an interview. We suggest that you check with your prospective employer prior to booking any tickets or rooms. If you take up a post you should speak to your new employer about removal expenses in line with section 26 of the General Whitley Council terms and conditions of service. Once in post you should ensure you understand your right to various expenses such as those for telephones and travel. Check in the BMA Consultants Handbook for further details.

Considering a contract and the associated job plan
When applying for your first consultant post, you should make sure you have at least a job description for the post, a proposed job plan (or at least a timetable of scheduled activities), a job specification and person specification. Whilst visiting you should ask for further details of the proposed job plan, proposed objectives and very importantly, the supporting resources available to allow you to carry out the work. If possible try to speak to others who work in the department or even the previous post holder to get a better idea of what the job entails. The BMA has published guidance on supporting resources which is available on the website. You should get further opportunity to explore this at interview and prior to full acceptance of the post.

It still happens that consultants start in post before a job plan has been agreed. Although it will be possible to agree a job plan at a later date it could be difficult to agree a higher number of PAs if you have been getting the work done in fewer PAs.

A basic contract should contain 10 Programmed Activities (explained below) which amounts to 40 hours or less per week. Consultants are not obliged (or entitled) to undertake any more than 10 PAs per week. New posts should only offer a 10 PA contract, and your job plan should quite clearly state the work to be undertaken in each PA. Where it is not possible for the department to maintain the necessary service then you may, at the discretion of the employer, be offered more than 10 PAs. You may elect to take up these extra paid PAs, or not, as you wish. The only obligation to work more than 10 PAs is related to the provisions concerning private practice detailed below.

Once the number of PAs has been agreed there is no obligation on you to take up additional work at standard PA rates (other than where the trust has requested an extra PA for private practice and you wish to remain eligible for pay progression). This leaves you the ability to negotiate locally an appropriate rate for the work. The LNC may have an important role to play in this.

You should also bear in mind that it may be possible to negotiate changes to the proposed job plan before you formally accept the post. Once you have been offered the post you should explore with the clinical manager the possibility of amending elements of the job plan that you dislike. Ultimately, if there are parts of the job plan that you cannot accept, you may choose not to take up the post.
Your contract of employment
Your contract should be based on the model contract agreed between the Department of Health and the BMA. It is important that you check your contract before agreeing or signing it and the BMA provides a contract checking service. If you need a contract checked please contact us on 0300 123 123 3 or email support@bma.org.uk. Although most of the time problems are unlikely, it is possible that mistakes can be made or your prospective employer may have made inappropriate changes to the contract such as not allocating sufficient SPA time (see below).

The job plan
Each consultant agrees a job plan with their employer as part of their contract. The job plan should include:

- A timetable of activities
- A summary of the total number of PAs of each type in the timetable
- Your on-call arrangements i.e. supplement category and rota
- A description of PAs for additional responsibilities to the wider NHS and profession and external duties, if any
- Any arrangements for additional PAs
- Any details of regular private work you carry out
- Any agreed arrangements for carrying out regular fee-paying services.
- A list of agreed objectives
- A list of supporting resources necessary to achieve objectives
- Any special agreements or arrangements regarding the operation/interpretation of the job plan
- Your accountability arrangements.

The contract is based on “PAs”: what are they?
PAs are “Programmed Activities”. (In older contracts they were called ‘sessions’ or ‘notional half days’.) A PA is 4 hours of work if done within the normal working week (7am to 7pm Monday to Friday). A PA done outwith this normal working week is 3 hours of work. Work done does not have to equal a “whole” PA (as some activities don’t need 4 hours of work per week): it is possible to schedule work as 0.5 PAs, average it more sensibly over a period of some weeks, or group a number of activities together added up to equal 1 PA. All of the activities in your job must be detailed in a job plan. You should not take up a post unless this has been precisely agreed with you. Any advertised post should include a proposed job plan in the information pack. If one is not included in that pack, you should ask to see one.
How many PAs should my contract be for?
The standard full-time contract is for 10 PAs. Posts that are less than full time will be for fewer than 10 PAs. Your prospective employer can advertise a post for more than 10 PAs, generally 11 or 12 (as greater than 12 would usually necessitate the consultant opting out of the European Working Time Directive, which an employer cannot require of them).

What are DCC and SPA PAs, and how many should I have?
DCC (direct clinical care) PAs form the largest time commitment in the contract. The standard 10 PA contract will have 7.5 DCC PAs. Examples of DCC activity include ward rounds, clinics, operating lists, clinical administration (dictation, phone calls about clinical matters etc), multidisciplinary meetings and so on. Supporting professional activity programmed activities are usually abbreviated as SPAs. The standard 10 PA contract should contain 2.5 SPAs. PAs are those activities which the vast majority of consultants undertake in addition to their clinical work which are essential to their department’s work and their own professional development. The standard 10 PA contract should have 2.5 SPA PAs. Examples of SPA activity include teaching, training, research, audit, departmental management meetings, dealing with non-clinical emails, personal continuing professional development (CPD), appraisal and so on.

Can my employer demand that I work more than 10 PAs?
No, they cannot. In reality many consultants may wish to work an 11th or 12th PA. The contract works both ways: your employer cannot demand more than 10 PAs of you in a full-time post, and you cannot demand greater than 10 either. (However, if you are contracted for 10 but believe in reality you are working more, please see the more detailed job planning advice listed at the end of this guide). One of the aims of the new contract is to give consultants a mechanism for limiting their hours of work, and this is one of the most powerful tools for that. However a consultant undertaking private practice who has declined an extra PA where one is offered may risk their pay progression. This does not apply if he or she is already working the equivalent of 11 or more PAs.

Many established consultants work more than 10PAs; when replacing them an employer might try to put all their clinical work into a 10PA job plan and cut the SPAs.
The importance of SPAs
Consultants should always have enough time in their job plans for non-clinical work (SPA time).

It is during SPA time that consultants have the opportunity to improve and hone their skills, research, innovate, develop new techniques and build new services. Consultants have a responsibility to ensure that the work they carry out in this time contributes to their job. Employers have a responsibility to support this and understand the link between quality and efficiency.

Some employers contend that “new” consultants need fewer SPAs and advertise jobs with fewer than 2.5 SPAs. We do not agree with that position, as we strongly believe that consultants at the start of their career have just as much to offer in teaching, training and managerial roles and have just as much, if not more, need for professional development. For these reasons, offering new consultants fewer SPAs is not justified, in our view. Consultants with 2 or fewer SPAs would find it extremely difficult to take any active role in teaching, training or management. Over time, the absence of such duties would also potentially prejudice that consultant if they were applying for CEA’s.

What should I do if I am applying for a job advertised with fewer than 2.5 SPAs?
The wording in the model contract is that job plans ‘will typically include an average of [7 1/2] Programmed Activities for Direct Clinical Care duties and [2 1/2] Programmed Activities for Supporting Professional Activities.’ A deviation from this should be questioned and the consequences understood. However, we recognise that for some applying for their first consultant post, particularly if there is competition for posts, acceptance of fewer SPAs may make some candidates feel they are more likely to get the job.

If you do accept a job with fewer than 2.5 SPAs you should make sure that your job plan specifies what you do in your SPA time and what objectives are associated with this work. Second you must keep a diary of all your work once you take up post. The BMA believes that SPAs are an essential component of a consultant’s job plan and we will fully support any consultant who is experiencing problems in agreeing an appropriate number of SPAs in their job plan.

You can request an interim review of your job plan if at this time you feel you are doing hours and duties beyond or different from what you are contracted to do. Your employer is obliged to undertake a job plan review if you request it, and there is a process of mediation and appeal if it does not result in a mutually agreed resolution. If you are not paid for 2.5 SPAs per week, you should make it clear to your employer that you cannot carry out the work that you would otherwise have been able to do. Using a diary and a record of what has previously been achieved in SPA time will underline the importance of the work you do and your employer will be more likely to understand what it is the trust will lose out on as a result of not agreeing adequate SPA time.

On the other hand, you may be reluctant to scale back necessary SPA work. Your case for proper payment for this work will be greatly strengthened by being able to produce an account of time worked and things achieved. The BMA can support you on this.

1 Paragraph 7.3 of the 2003 model contract
Pay thresholds
On appointment, consultants are placed on a pay threshold determined by their seniority. Existing consultants’ seniority is the sum of the number of whole years completed as an NHS consultant, plus the point on the salary scale when appointed (on a scale of 1 to 5), plus any additional credited seniority (in whole years) to reflect non-NHS consultant level experience or flexible training.

Newly appointed consultants will normally be placed on the first pay threshold but may be placed on a higher threshold where they have approved consultant level experience, have participated in flexible training or have undergone dual qualification. Consultants appointed from the Associate Specialist grade will start their new appointment at the threshold in the scale next above their previous salary.

Resident on call and shift working
Some employers experience difficulty covering resident rotas, particularly as junior doctors become less available for out of hours work. It may also be appropriate in some locations and some specialties (e.g. paediatric ICU, acute obstetrics and others) for consultant care to be available on site round the clock. The consultant contract protects you from resident on call work without your agreement (terms and conditions of service schedule 8, paragraph 4). Guidance is available on the BMA web site.

The appointment process
All consultants should be appointed using the NHS (Appointment of Consultants) Amendment Regulations 2004 and supporting guidance. The regulations and subsequent amendments do not apply to NHS Foundation Trusts although most choose to use the process described in the regulations.

In recent months, the BMA has become aware of a number of instances where the guidance is not being followed by Foundation Trusts. Although this is lawful, the BMA firmly supports the use of the regulations as a quality and standards safeguard. If you believe the processes are not being followed, you should contact your royal college and the BMA.

This guide is not intended to cover other matters in the appointments process such as writing a CV and interview skills. The British Medical Journal careers focus at http://careers.bmj.com has a great deal of useful advice.
Settling in to your consultant job

On appointment
Once offered the post, you should arrange an early meeting with your clinical manager, ideally before starting, so that you can finalise the job plan which should include all the various aspects set out earlier in this paper. The BMA, your royal college, specialty association and colleagues will be able to provide advice on whether the job plan you have been offered is reasonable.

It is important to accurately assess the amount of on-call work that you will be doing. If there has been a previous post holder, this should usually give an indication of what the assessment should be, as should the allocation for other colleagues in the same specialty. Over the first few months of the job you should keep a work diary to ensure that your job plan accurately reflects the nature of your post.

Reviewing your job plan
When you come to review your job plan at an interim meeting or at the annual review, you should ensure that you have a clear idea of whether or not the existing job plan accurately reflects the work you actually do. Keeping a diary of your workload will be vital for this; there is a diary available on the BMA website.

You should bring all the relevant data needed to plan the activities for the coming year. For example this could include:

- A working time diary;
- Relevant specialty advice on workload e.g. the CCSC’s specialty advice, royal college and specialty association guidelines
- Information on activities undertaken in SPA time
- Audits
- Teaching
- Appraisal
- Clinical management
- Continuing education and professional development (CEPD)
- Administration
- Research
- Views on future objectives
- Evidence to support suggested new resources required to meet the work and objectives within the contract.

The job planning process should take place (at least) annually and should mean that workload and objectives meet patients’ needs as well as addressing the work/life balance of consultants.

If you are requesting an interim job plan review because you wish to persuade your clinical manager to agree a change to your job plan, your case will be enormously strengthened by being able to produce supporting information. We cannot stress highly enough the importance of being to provide an authoritative account of the hours you have been working and an account of what you have achieved in that time. If you are unable to secure the changes you need, contact the BMA for advice and support in the mediation and appeals process. In our experience, appeals panels pay great regard to such authoritative supporting information.
Top tips

Essential advice before starting

- Make sure you get good advice
- Contact your trade union representative
  - 0300 123 123 3
  - support@bma.org.uk
- Check with the Local Negotiating Committee
- But you must do some of the work yourself in order to get the best results and to understand what you are entering into
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