SASC implementation guidance – programmed activities
There are 4 types of Programmed Activities which should be built into the duties of a new (2008) Associate Specialist and Specialty Doctor. These are:

- Direct Clinical Care
- Additional NHS responsibilities
- External Duties
- Supporting Professional Activities

The following lists and examples are primarily supplied by BMA members and are intended to be indicative of the types of activity that might fall under each heading. They are not intended to be an exhaustive list and there will be many examples of other activities that should be included in your job plan. Many of the examples below are specialty specific or nation specific but we hope that this list will assist you with your own work programme.

Some managers might want to class activities under different headings and this is acceptable as long as there is adherence to the underlying principle that all work done is remunerated.

### Activities undertaken in direct clinical care

Direct Clinical Care is work that directly relates to the prevention, diagnosis or treatment of illness. It includes:

- Ward rounds (pre-op, post-op or other)
- OPD clinics (activity and diagnostic work)
- Theatre lists (including pre-operative and post-operative care)
- Ward duties
- Reviewing results
- Patient management plans, etc.
- Administration relating to patient care
- Team meetings to discuss patient care
- Telephone calls relating to patient care
- Travel time - to peripheral clinics or sites
- Emergency duties (including emergency work carried out during or arising from on-call)
- Public Health
- Treatment sessions
- Multi-Disciplinary Meetings

### Activities undertaken in additional NHS responsibilities

Additional NHS Responsibilities are special responsibilities within the employing organisation not undertaken by the generality of doctors, which are agreed between the doctor and the employer and which cannot be absorbed in the time set aside for Supporting Professional Activities. These could include, for example:

- Department of Health Working Party
- Clinical manager work
- Clinical audit lead
- Clinical governance lead
- College Tutor
- IT discussion group (Eg. Lorenzo implementation group, Choose and Book Local Advisory Group etc)
- Optional/ Discretionary Point panel work
- Appeals panel work

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a Part time AS doctors who remain on the pre-April 2008 contract may include up to half an hour travel time in each direction from home or private consulting room (whichever is the nearer) to main hospital or principle place of work (paragraph 61 TCS)

b Or taken as special/professional leave
Activities undertaken in external duties
External duties is work that is not included in the definitions of ‘Direct Clinical Care’, ‘Supporting Professional Activities’ and ‘Additional NHS Responsibilities’, and not included within the definition of Fee Paying Services or Private Professional Services, but are undertaken as part of the job plan, prospectively agreed between the doctor and the employing organisation without causing undue loss of clinical time.

External Duties might include, for example:

- BMA Committees/work or other Trade Union duties
- Royal College/Specialty Association/GMC work in the interest of the wider NHS
- Local Negotiating Committee (LNC) work
- Trade union duties
- Work for a government department

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<tr>
<th>GENERAL HEADING</th>
<th>SPECIFIC ACTIVITIES UNDERTAKEN</th>
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<tr>
<td>External Duties</td>
<td>– BMA (including LNC) work involving local and national meetings, regular e-mail correspondence, reading of related documentation in preparation for meetings, etc.</td>
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<td>– Participation in discretionary/optional points committees as BMA representative or external member</td>
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<td>– CESR evaluator for a Royal College</td>
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<td>– UK National External Quality Assurance Steering Group for CSF Biochemistry</td>
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<td>– UK National Quality Assurance Advisory Panel</td>
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<td>– Officer role in national specialist societiesC</td>
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<td>– Membership of Area Partnership Forum</td>
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Activities undertaken in supporting professional activity time:
These underpin Direct Clinical Care Work. These might include, but are not restricted to, participation in:

- Continuing professional development
- Local clinical governance activities
- Training
- Formal teaching
- Management
- Appraisal
- Job planning
- Audit
- Research
- Job planning
- Medical education
- Clinical governance
- Contribution to service management and planning

C Often taken as special/professional leave
<table>
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<th>GENERAL HEADING</th>
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| Continuing professional development | - Educational meetings (lunch-time and evening) and associated paperwork e.g. applying for CPD certificates with records of educational meetings attended and CPD points  
- Reading and other self study, On-Line Learning/CPD Modules, Postgraduate Meetings, Peer Meetings (Specialty and Locality), External Training Events (lectures, courses, conferences, case presentations, journal clubs)  
- Meeting requirements as set by the appropriate Royal College  
- Review of papers for journals  
- Business travel time (as necessary e.g. for a CPD/training event/audit /research outside your place of work)       |
| Teaching and training           | - General teaching, lectures and tutorials for medical students and junior doctors  
- Journal clubs  
- Tutorials, Problem Based Learning, In and Out-patient learning sessions  
- OSCE examiner  
- Case summary guidance  
- Occasional project supervision  
- Post graduate supervision of junior medical staff on the consultant’s team – formal timetabled sessions and daily support and advice  
- Staff Grade supervision (if applicable)  
- Writing references  
- Mentor for students on the medical course – scheduled meetings twice a year and as necessary  
- Organising and delivering teaching for nursing staff, to allow them to achieve nationally necessary competencies  
- Reading and commenting on updated teaching materials prepared by colleagues  
- Marking medical student essays  
- Teaching and examining for postgraduate exams and diplomas  
- Grade feedback meetings with medical students  
- Writing presentations for unit teaching and other meetings  
- Undergraduate teaching and examinations –PBL, contribution to Special Study Modules, regular tutorials for MBChB students, examiner in MBChB, OSCE and final examinations  
- Adviser of Studies to MBChB students  
- Teaching trainees (as applicable)  
- Contribution to clinical handbooks  
- Voluntary Organisation and Carers & Users’ Groups  
- Teaching  
- GP and Psychological Services Teaching  
- Teaching non medical staff e.g. AHPs, Pharmacists and Nursing Staff |
| Clinical Management/ Educational activities | - Educational supervision-ST trainees  
- Assessment and appraisal of trainees  
- Revising/rewriting junior doctors’ induction pack  
- Departmental teaching meetings and preparation  
- Membership of Medical Education Committee  
- Writing business plans  
- Liaising with PCT over shared care pathways |
| Audit | - Supervision of audit (ie Directing and supporting trainees’ audit projects)  
- Planning individual/department audit projects  
- On-line assessment of audit mortality notes  
- Scrutinising internal audit data  
- One hour a week memory clinic |
| Job planning | - Job planning preparation including diary keeping and completing job planning paperwork  
- Annual job plan review with manager  
- Job planning reviews for SAS colleagues if a clinical manager |
| Appraisal | - Individual as appraisee: collation of information for appraisal folder and preparation of the paperwork  
- Annual appraisal meeting  
- Appraiser of SAS colleagues e.g. doing appraisals and associated paperwork  
- Appraising consultants and associated paperwork  
- Training SAS doctors on the appraisal process  
- Writing guidance on appraisal |
| Revalidation | - Meeting requirements as set by the GMC |
| Research | - Research Projects |
Contribution to service management and planning

- Divisional meetings and associated work
- Reading and disseminating management guidelines and policies
- Clinical Policy Forum work
- Local specialty advisory committee membership
- Organising locum cover for junior doctors
- Staff interviews, including short-listing
- Developing a policy on intrathecal medicines for the health board, delegated by the medical director
- Area medical committee (Scotland) and hospital subcommittee duties, including meetings and preparation
- Medical staff committee/association duties, including meetings and preparation
- Rota design, planning and management, including for August 2009 EWTD compliance
- Management meetings about EWTD
- Directorate meetings or other unpaid directorate work
- Meetings on MMC Communications Strategy
- Reading and replying to emails about department and Trust related “management” matters
- Hospital at Night and junior doctors’ support group meetings
- Membership of Departmental Management Teams
- Lead Clinician roles
- Updating unit documentation and patient information
- Dealing with complaints, clinical incident investigations and critical incident reviews

Clinical governance/management activities

- Managed Clinical Network Activities
- National Panel list for AS appointments
- Secretary of local specialist society involving organisation of educational meetings, plus minutes, CPD certification, paperwork etc.
- Participation in local clinical governance committees
- Participation in local and national guideline groups

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