Key points:

- BMA Scotland believes that consultant vacancy data doesn’t reflect the full extent of the recruitment and retention problems affecting the NHS in Scotland.

- Consultants are vital in delivering high quality patient care: leading teams, developing services and sharing expertise. They are dedicated to the fundamental principles of the NHS and lead teams of healthcare workers effectively and efficiently, adding value to patient care. They carry ultimate clinical responsibility for every patient seen under their care.

- While the official consultant vacancy figures used by the Scottish Government show rising consultant vacancies in Scotland, they do not capture the full extent of vacancies across the country and therefore the true impact on doctors and patients within the service.

- To address this, the BMA Scottish consultants committee submitted a Freedom of Information (FOI) request to all NHS boards in Scotland for their consultant figures for 31 August 2014. From the questions we asked, we have captured a more complete picture of consultant vacancy rates in Scotland.

- The FOI responses give an overall consultant vacancy rate for Scotland of 11.32%

- The FOI data also suggests an over-reliance on locums, with 5.39% of vacant posts being covered by locums. This is not a viable long term solution.

Why are the official figures not capturing the full picture?

- We are not suggesting that the official figures are inaccurate, rather that they don’t show the full picture of consultant vacancies across the country and its impact on the service. Member feedback and evidence from NHS boards themselves point to a mounting problem across the service.

- The ISD definition of a consultant vacancy is “A vacancy is a post which has been cleared for advert after being through the redeployment process (internal or external advert) and remains a vacancy until an individual starts in the post.”

- Vacancies not filled through the recruitment process can be removed temporarily from the overall establishment figure, and posts not yet cleared for advert are also excluded. Moreover ISD figures do not fully reflect the heavy reliance on locum doctors that boards are using to cover vacant consultant posts. Filling posts with locums is a temporary solution and does not provide long term sustainability. It is therefore vital that these posts are included in vacancy data to enable proper workforce planning.

1 NHS Information Services Division (ISD) produces health service data for Scotland, which includes vacancy rates and figures for consultants in NHS boards. These figures are published quarterly.
FOI requests to NHS boards

- We undertook an FOI data gathering exercise to try to get a broader picture of the scale of the issue, by including posts where someone has left but the advert for their replacement hasn’t yet been authorised, where a vacant post is being covered by a locum, including agency locums, and those vacant posts which an has employer tried and failed to fill, and is not currently re-advertising. These are not currently included in the ISD data.

- The responses we got from NHS boards are incomplete, but do give a consultant vacancy figure of 11.3%, which is almost double the official ISD figure from 30 June 2014 of 6.9%.

- Our vacancy data includes 5.39% of posts which are covered by locum doctors. The true figure is likely to be even higher since NHS Greater Glasgow & Clyde, the largest employer, did not provide any figures for the agency locums it employed to cover vacant consultant posts. NHS Grampian also did not provide complete vacancy figures.

Local examples

Concerns from our members about consultant vacancies has similarly been reflected in the media. There has been a steady rise in reporting of the problem of a growing shortage of doctors and the impact this is having on the service:

- In May 2014, the Chief Executive of NHS Dumfries & Galloway reported that the number of vacant consultant posts in Dumfries and Galloway was at its highest level in more than a decade, with more than 20 unfilled positions last year and may be as high as 22 (this is against the ISD reported 19)\(^2\).

- In June, A & E consultants in NHS Grampian publicly raised concerns that, due to staff shortages, they would be unable to continue to provide safe care for patients, e.g. resuscitation of those with life and limb-threatening conditions. They were also concerned about the potential impact on all staff who work in the emergency department, unscheduled care and the rest of the hospital. Following this, NHS Grampian announced an independent review to ensure that the right level of healthcare is being maintained across its services\(^3\).

- In June, the Courier published an article about concerns around consultant vacancies in Fife, when the board confirmed that close to a quarter of its 170 acute division consultant posts had not been permanently filled due to difficulties in recruitment.

- NHS Lanarkshire shows an official vacancy rate of 5 per cent. The BMA FOI vacancy rate showed nearly 13 per cent, and includes a locum rate of nearly 5 per cent. The Chief Executive of NHS Lanarkshire recently confirmed to the Public Audit Committee that 10 per cent of consultant posts were vacant in October 2014, with use of locums above that rate.

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Implications of consultant vacancies

- Vacant posts place immense pressure on the service. When NHS boards cannot fill a post other doctors within the team have to cover the workload or the service provided may be reduced. Staff are asked to work increasingly longer hours and more intensely to fill the gaps, and a recent Audit Scotland\(^4\) report on NHS Scotland reflects this growing staff pressure, as many NHS boards have reported difficulties filling medical vacancies leading to greater use of locum doctors.

- Doctors are dealing with rising demand, unmanageable workloads and increasing pressure in a service that is clearly struggling to cope with shortages. This situation is not sustainable and doctors in Scotland are working under significant pressure and increasingly having to cover gaps in the face of rising vacancies.

Cost implications

- The use of locum doctors has become commonplace as a means to plug the gaps in the medical workforce. Audit Scotland recently highlighted the increasing use of locum doctors by boards to maintain services\(^5\), which in turn is adding significantly to financial pressures in the NHS as a costly way to staff the service. The Scottish Government’s own evidence to the DDRB acknowledges these shortages and notes that an option to maintain cover in the face of shortages is for boards to ‘buy in’ locum services which can be at considerable cost per percentage of the overall wage bill for some smaller boards\(^6\).

Conclusion

BMA Scotland is concerned that the official ISD figures do not reflect the full picture of consultant vacancies on the ground. Our members tell us they are working under significant pressure and are increasingly having to cover gaps where vacancies cannot be filled. The over-reliance on locums also needs to be addressed to ensure that future workforce planning has accurate data to work with.

We are calling on the Scottish Government to work with us to ensure that official figures accurately reflect the issues affecting recruitment and retention in the NHS, to inform effective and sustainable solutions to be developed in order to ensure that the NHS continues to provide quality patient care.

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\(^4\) The NHS in Scotland 2013/14, Audit Scotland, 30 October 2014
\(^5\) The NHS in Scotland 2013/14, Audit Scotland, 30 October 2014