

Christopher Pilgrim

Chair Review Body on Doctors' and Dentists' Remuneration 8th Floor, Fleetbank House 2-6 Salisbury Square London EC4Y 8JX

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Dear Christopher,

Since our oral evidence session on 9 March, the situation with COVID-19 rapidly escalated resulting in a challenging and complex environment which has put unprecedented demands on the NHS. This required our doctors to go above and beyond to support the national effort to tackle the virus. Therefore, I felt it was important to write to you to ensure this is recognised in your recommendations to the UK and devolved governments.

Doctors have demonstrated resilience, dedication and professionalism throughout this difficult time to provide safe and effective patient care, with some healthcare workers paying the ultimate sacrifice. They are having to be agile and extremely flexible in the way they work, with many working very long hours, frequently in unfamiliar healthcare settings, without access to sufficient personal protective equipment and lack of clarity over their death in service cover. Another challenge some of our members have faced is the lack of childcare support available to them due to the government measures that are in place, resulting in significant increases in their childcare costs which are also being heightened by the additional hours they are working. This is against the backdrop of severe clinical pressures, they have played a vital role in managing system changes, using considerable skill, innovation and demonstrating consistent leadership to develop new models of care to ensure patients can be cared for across the NHS in many different settings. This has all been done rapidly and without any national recognition in terms of pay and reward.

Beyond the pandemic there is going to be a need to develop strategies to deal with the backlog of non-emergency work which is accumulating although it is essential that doctors are encouraged to rest and use of their annual leave. The unprecedented demands on doctors will therefore continue for some considerable time as they will play a leading role in the effective transition from current models of COVID-19 focussed care to restoration of other vital healthcare services.

We are therefore concerned that such conditions will result in a high rate of staff attrition. Evidence from a survey completed by nearly 16,000 doctors this month, found that over 40 per cent were suffering with a mental health condition due to or made worse by their work. It is essential, if the NHS is to have any hope of setting right the current backlog of care, that staff are properly rewarded to at least partly mitigate for further retention issues.

Furthermore, although the government raised the level of threshold income at the recent budget, the extraordinary pressures related to COVID-19 have resulted in doctors doing much longer hours of work





including a greater proportion in unsocial hours. As a result, it is likely that many more doctors than expected will face significant additional tax bills. When making its recommendations, the DDRB should ensure that not only are doctors appropriately remunerated for their extraordinary efforts during this crisis but that no doctors are in fact disadvantaged for doing the vital work that patients need.

We also feel it important to ask the DDRB to signal to the Westminster government that any pre-agreed deals should be supplemented to reflect the current situation. Both junior doctors and GPs in England have secured multi-year pay awards through their respective contract negotiations, however these deals do not take into account the effort of doctors responding to the unforeseen challenges they have been presented with over the past several months and likely many more to come. Furthermore, it would unreasonable to expect GP partners to find themselves liable to paying a higher than expected award to their salaried employees - both doctors and other practice staff – if they do not get the necessary additional funding to cover this challenging and unexpected situation. This would result in GP partners receiving a lesser pay award than any other NHS employee.

Finally, you will be aware that the UK Government has developed significant financial support packages for businesses demonstrating its willingness to spend when it is felt necessary. However, initiatives announced to support doctors on the frontline have fallen short of appropriate recognition of the tireless efforts of our doctors. This is in stark contrast to the appreciation shown by the public for NHS and social care staff recently. It is important that the UK Government does the same and fairly remunerate our doctors. Therefore, this year more than ever, we urge the DDRB to properly reward doctors for their tireless efforts.

Yours sincerely,

Dr Chaand Nagpaul CBE BMA Chair of Council