

Junior Doctors Conference 2021

Dr Sarah Hallett, BMA Junior Doctors Committee chair.

Chair, Conference.

The last time that this conference met, in 2019, we could never have predicted the two years that were to follow before we would get the chance to meet again.

The world has changed in previously unimaginable ways - this virtual conference being just one example.

This has been an extraordinarily difficult time for junior doctors across our NHS.

A colleague made a comment in an interview with The Doctor magazine recently, that really resonated with me, and I think captures the feelings that many of us will have when this pandemic is finally over.

They said "I think, when the dust settles, I am going to have a significant amount of emotions to have to deal with.'

The Covid-19 pandemic has been brutal:

We have worked in a health service stretched to its limits; and in some cases overwhelmed;

Some of us haven't been able to see our families for more than a year;

And we have witnessed, suffered, and mourned the losses of our patients, of our colleagues and of our loved ones.

It has tested us as a profession, and as an Association, in ways we have rarely seen.

It has affected all aspects of our personal and professional lives, and it has not been easy for any of us. Whether we have been treating Covid patients, supporting and comforting families, being redeployed to unfamiliar departments, shielding due to high-risk clinical environments, or working in specialties which have borne the vast indirect impact of this public health crisis.

For junior doctors, this has been no environment in which to train effectively. Finding time to study has been near-impossible, educational activities have been interrupted, and working days have often felt endless. In spite of this, we have put our patients first, and we - like the rest of the profession - have done indescribably important work in the most horrific and relentless of circumstances.

I may not be speaking to you today in a packed conference hall but I am, regardless, full of pride to be addressing you as your JDC chair in a year where you have gone - and continue to go - so far above and beyond. You have shown, once again, exactly why our profession, and our NHS, hold such special places in the hearts of the people of this country.

If there has been one particular positive of this last year, it has been that the BMA has been more united than ever before - and we have shown what a campaigning organisation can achieve when we come together with the same values and ambitions. Your Junior Doctors

Committee and the other branch of practice committees have risen to the challenges of this pandemic and, together, we have led debate, lobbied Government and driven vital action to protect frontline staff and influence ministers' decision making.

We were the loudest voice demanding adequate PPE for staff.

We were the first to demand risk assessments for frontline workers.

We have led the way in highlighting the disproportionate impact on black and ethnic minority communities and colleagues.

And we have not just been a consistent voice of reason for quick and effective measures to stop the spread of this disease, we have also fought to ensure that healthcare workers were a priority once a vaccine against this devastating virus was found.

Every step of the way we led with the experiences and expertise of our membership at the very heart of everything we did - with regular surveys of unprecedented numbers of doctors informing our decisions and driving our lobbying. Thousands of doctors took the time to tell us of the realities they were facing, the strain on their local systems and services and the impact on their professional and personal lives. We took our members' experiences and gave them a united voice - dominating newspaper and broadcast coverage, influencing parliament and placing doctors at the heart of the debate around the pandemic response.

United, the BMA can wield great influence and drive genuine change. This is crucial for doctors, it is crucial for the NHS and -- it is crucial for patients.

Now, more than ever, there should be no doubting the importance of our collective voice as a profession, as a professional body and as a trade union.

Last time we came together - two years ago - we were on the verge of agreeing a new contract deal for junior doctors in England. After a turbulent period of dispute and negotiation we came to an agreement that delivers real progress for junior doctors' terms and conditions and working environments, and that was backed in an 82% yes vote by our membership.

We won £90 million of new investment into the contract, including improved pay for weekends, an additional £1000 per year for LTFT trainees, and a fifth nodal point on the payscale, which increases the pay of senior trainees by thousands of pounds a year. It also guaranteed us, through our direct negotiation with government, annual above inflation pay rises rather than four years of uncertainty.

The deal represents the culmination of years of work from the JDC, and the full list of changes are too numerous to list, but range from improvements in rest and safety entitlements, to the contractualisation of the code of practice for rota notice periods - a key step towards ensuring that all junior doctors get their rotas on time.

Last month, after a huge amount of hard work from your representatives running over months and years, and despite a global pandemic, we agreed and published version nine of the contract to fully implement these hard won contractual improvements. The benefits of this will now be felt by junior doctors across England.

We can now enter the first step in a new phase of maintaining and improving the contract. Having concluded the process of dispute and negotiation, we have now reconvened the joint negotiating committee with NHS Employers, and are getting straight to work in identifying the

issues you face in your daily working lives and pursuing further improvements to your terms and conditions. We will be establishing working groups looking at issues around annual leave, improving the provisions for doctors working non-resident on call shifts, parity of pay for GP trainees and, crucially, health and wellbeing support for junior doctors.

Our colleagues in the devolved nations are also working hard to improve the working lives of junior doctors in Scotland, Wales and Northern Ireland.

The Welsh junior doctors committee continues to work with Welsh Government and NHS Wales Employers on reform of the junior doctor contract. I am pleased to report that the negotiating team is making good progress, and talks will continue throughout 2021.

Both the Welsh junior doctors committee and the Northern Ireland junior doctors committee have been continuing to roll out the implementation of a single lead employer in Wales and Northern Ireland for all hospital-based trainees; both should be completed by the end of 2021.

The Northern Ireland junior doctors committee has representation on a Department of Health led working group which has been set up to review the Autumn monitoring data and the status of trainee rotas following the suspension of monitoring during COVID.

The Scottish junior doctors committee and Scottish Government/employers have agreed to a 3 for 2 deal, converting two days public holiday to three days annual leave for junior doctors in Scotland. They have also reached agreement that supporting work-life balance should be given greater priority when rotas are being designed and from August last year, junior doctors will be notified at least six weeks in advance where any period of fixed leave remains in rotas. It is intended that junior doctors having to take their annual leave in set weeks becomes the exception.

Also in Scotland, all junior doctors in training programmes are now employed by one of four health boards for the duration of their training. This brings a number of benefits including less paperwork and fewer problems when moving post.

This is just the tip of the iceberg with regards to their work, and you can find more information about this in the packs you were sent for this conference.

Whether it be with national governments, or local managers - negotiations are not always easy. The outcomes are not always perfect. It can be easy to become frustrated or disillusioned. However, through consistent, constructive and committed work, we really can make a difference.

The interventions of our reps and staff during this most recent pandemic wave have ensured that where rotas were being written in the middle of a crisis to keep our patients safe, that these were also safe for doctors, and did not breach contractual safety rules.

We gave a voice to junior doctors who raised significant concerns about new recruitment processes and mitigated against these changes.

And our lobbying across the four nations ensured that vital annual leave days could either be carried over, or else paid. Without the work of the BMA, these days would have been lost.

Throughout the pandemic we have had meetings with the Department of Health and Social Care, statutory education bodies, employers, regulators and the Academy of Medical Royal

Colleges. We are an assertive, constructive, and strong voice, representing junior doctors in every stakeholder meeting, and we are being heard. Through these relationships we have achieved vital changes over the past year.

For several years, JDC have lobbied for a no fault outcome for doctors who have not been able to achieve competencies for their ARCP end of year assessments, for reasons beyond their control. This year, through work with the GMC and the deans, our reps have been involved in the development of the Outcome 10, allowing doctors to progress through training despite difficulties presented by the pandemic, and ensuring progression - and access to higher pay points - could still be facilitated in spite of these challenges.

The Out of Programme Pause (OOPP) proposal has been developing in England since 2018 in order to allow trainees the options to temporarily step out of their postgraduate training programme while still working clinically, and often flexibly. The JDC has been a key stakeholder in this work, and this will be made available to trainees, via HEE local offices, from late summer 2020, allowing our members the opportunity to work more flexibly for the benefit of their health and wellbeing or simply to improve their work-life balance.

BMA representatives negotiated improvements to relocation and mileage expenses for junior doctors in England. The latest version of the framework negotiated with Health Education England includes an £2,000 overall increase in the maximum relocation allowance, changes to make the system more equitable for LTFT trainees, and the removal of the cap placed on expenses eligible to be claimed by foundation doctors.

Finally, after lobbying by the JDC, and successful pilots over recent years, we are delighted to see the commitment now made by Health Education England to roll out flexible, less than full time training to all junior doctors across all specialties. It means that over the next two years, as it is rolled out, trainees in England will no longer need to meet specific criteria to qualify for the right to work LTFT.

The efforts of NHS staff over the last year have been nothing short of extraordinary. We believe that the whole profession deserves a significant pay uplift, as a result of the efforts made during this pandemic.

We also believe that this uplift must include doctors who are already involved in multi-year paydeals, where the impacts of the pandemic could not have been foreseen. That is why, this week, we will be joining our colleagues from other branches of practice in the BMA's Fairness for the Frontline campaign - calling for a pay rise for staff and the reversal of the decision to freeze the pension lifetime allowance announced at this year's budget.

Regardless of that campaign - and thanks to our work in negotiations on behalf of junior doctors in England - we have the security of year-on-year 2 % above inflation pay rises, as well as the additional pay point at £7,200 from next year for trainees at ST6 and above. This was a hard-fought, guaranteed rise, in a period where money for public services has been incredibly sparse.

We will continue to campaign for pay uplifts that value our NHS staff, across the 4 nations.

I started my speech today with a comment from a colleague who was reflecting on their role on the frontline during the pandemic. They said: 'I think, when the dust settles, I am going to have a significant amount of emotions to have to deal with.'

These are sentiments which apply to so many of us:

Our friends and colleagues spent their days dealing with death with such alarming regularity that it would impact anyone.

For months the media was full of the testimony of doctors pushed to the very brink.

Our surveys tell us that thousands of doctors are currently suffering from depression, anxiety, stress, burnout, emotional distress or other mental health conditions that have been made worse by working life during this pandemic, and research earlier this year found that nearly half of ICU staff are likely to meet the threshold for PTSD, severe anxiety or problem drinking during the Covid-19 pandemic.

This is unacceptable in any workplace - let alone in our National Health Service.

Yet, despite the mounting evidence, the torrents of testimony, there is precious little action from the government and our employers. One junior doctor who recently told me of her struggles found her trust only employed one psychologist to help staff like her struggling to cope.

This cannot be right.

This week we are launching a wellbeing checklist for junior doctors. This tool will mean you, and your local BMA reps, can audit your trusts and we can push for better support as a result of the evidence we gather.

Wellbeing is also the theme of a key working group that we are establishing as part of resuming our negotiating meetings with employers.

But this has to be just the start of a comprehensive reassessment of wellbeing for junior doctors. It is now time to stop the silo working and join together all of the excellent work being done across the NHS to work better for all healthcare staff.

Our experiences during this pandemic have demonstrated that this work is required urgently.

The truth, however, is that the NHS was understaffed, and it was underfunded for years before this pandemic. Burnout and low morale have been realities of daily life for many doctors for years -

Junior doctors have been caught in a perfect storm, often first to see patients, bearing the brunt of this national crisis, while in many cases, our training and our progression through our careers has been put on hold.

We must see action from organisations like the NHS, the statutory education bodies and the government, to step up and work with us to put in place real, practical, support to deal with these issues affecting our morale, our training and our wellbeing.

We need initiatives to keep junior doctors progressing through their training and in the workforce, or we risk losing a generation of doctors. And it is our patients who will feel the consequences of that disaster.

That means clear political and institutional will. That means a commitment and resources for genuine change. And that means support for real, sustainable progress.

We will continue to stand up and demand change. We will continue to be a strong voice in the debate. And we will continue to lobby the organisations with power to make change and we will lead the debate on issues which affect us all as junior doctors.

Conference. This last year has indeed been exceptionally difficult.

But the hardships and the horrors we have faced have been more than matched by the compassion, dedication and skill of junior doctors across all specialties and all around the country.

That compassion, dedication and skill cannot be forgotten and it must not be taken for granted.

It has been an extraordinary privilege to represent junior doctors this year.

I want to say a huge thanks to our reps and to our incredible staff, without whom none of this work would happen. Finally, thank you to our conference teams, for ensuring that despite the challenges we face, that we could come together today, to discuss, debate and create policy.

Together, we can take the next steps towards a better future for junior doctors.

Thank you.