

Training, development and career management of Staff, Associate Specialists and Specialty Doctors

Proposal from the Northern Ireland Staff, Associate Specialists and Specialty Doctors Committee to the Department of Health



Foreword



The BMA Northern Ireland Staff, Associate Specialists and Specialty Doctors Committee (NISASC) is committed to developing the role of SAS doctors as a valued and integral part of the medical workforce in Northern Ireland.

As confident and competent healthcare professionals we deliver clinical services in partnership with our consultant colleagues and other healthcare professionals.

Over the last few years, NISASC has focused its efforts on developing the SAS career development proposal, in order to help improve opportunities for training and development, information sharing and educational networking. To this end, we are calling for the appointment of a SAS lead within each Trust and also the appointment of an Associate Dean/Regional SAS Co-ordinator.

With the closure of the Associate Specialist grade in 2008, the lack of career progression has meant little opportunity for recognition for the significant clinical and leadership roles played by SAS doctors. Knowing that being valued leads to greater engagement with increased job productivity and satisfaction, we are also calling for the re-introduction of the Associate Specialist grade.

We hope that this proposal will lead to greater understanding, at all levels, of the vital importance of SAS doctors in secondary care, and to more professional development opportunities for this ever-growing group of senior trained staff.

Dr Carole Cairns

Chair

BMA Northern Ireland NISASC

Executive summary

Staff, Associate Specialists and Specialty Doctors (SAS) are a diverse group with regards to their level of knowledge, training, performance and their needs. Their roles are seen as providing a high service component and they function in a variety of specialties in hospital medicine whilst providing experienced and specialist patient care. SAS doctors have been described as the dependable backbone of the medical workforce.

The transformation agenda proposed by the Minister's vision and the report from the expert panel, recognises the need for new models of care and for ambitious change to continue to provide high quality and safe care for patients. Effective clinical engagement with SAS doctors will be essential, and needs to be backed up by institutional resources and support. SAS doctors will have the opportunity to play a significant role in these new models of care through leadership and developing innovative solutions, if the right support is put in place.

BMA Northern Ireland welcomes the opportunity to submit this proposal to the Department of Health to ensure that resources and support arrangements are put in place across Health and Social Care Trusts to ensure a cohesive approach to training and career management for all SAS doctors.

BMA Northern Ireland SASC recommendations

- SAS lead: BMA Northern Ireland recommends that each Trust appoints a SAS doctor with specific
 responsibilities for the development of SAS doctors in their Trust. This role should take account of the
 business objectives of each Trust and be directly responsible to the Medical Director.
- Resources: Each Trust should identify adequate resources to support the work of the SAS lead.
- Associate Dean: BMA Northern Ireland recommends that an Associate Postgraduate Dean/Regional
 Co-ordinator for SAS doctors is appointed and funded by the Department of Health to develop and
 deliver quality management and enhancement for CPD for SAS doctors on a regional level.
- Associate specialist: BMA Northern Ireland recommends that the Associate Specialist grade is reopened subject to the (Northern Ireland) 2008 contractual terms for Associate Specialists.

Introduction

In 2015 the Department of Health (DoH) published 'A Charter for SAS Doctors in Northern Ireland (the charter)'. This charter sets out both the rights and responsibilities of SAS doctors and their employers, and recognises the pivotal role that SAS doctors hold in the delivery of high quality medical care for patients in health and social care in Northern Ireland.

In addition, Health and Social Care Trusts in Northern Ireland have shown a willingness to actively encourage and support SAS doctors to ensure their training and development needs are identified and addressed and their career aspirations, in keeping with service needs, encouraged and supported. However, this now needs to be scaled up to ensure a consistent approach is taken across Northern Ireland and resources made available to enable this to happen.

The following publications also acknowledge the need for continued investment and recognition of SAS doctors across Northern Ireland:

- Choice and Opportunity, Department of Health 2003
- Employing and Supporting Specialty Doctors, A Good Practice Guide, DOH June 2008
- Regional Guidance on Job Planning for Associate Specialists and Specialty Doctors in Northern Ireland, DoH NI June 2009
- Developing Specialty Doctors, July 2010

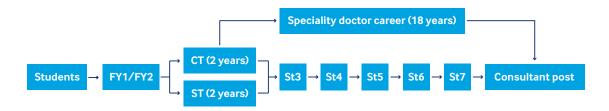
Purpose

The purpose of this proposal is to enlist the support of the DoH to ensure that resources and support arrangements are put in place in Trusts to capture this willingness, and provide an infrastructure within Northern Ireland to ensure a cohesive approach to training and career management for all SAS doctors. Quality healthcare provision will undoubtedly be enhanced if SAS doctors are actively encouraged to realise their full potential by contributing to health services more widely.

Who are SAS doctors?

SAS doctors comprise Specialty Doctors, Associate Specialists, Staff Grades, Hospital Practitioners and Senior Clinical Medical Officers. This group of senior doctors are a core component of the medical workforce and are highly specialised. They often work independently and contribute to other roles such as research, teaching and audit.

Figure 1. Doctors training process



The above diagram outlines the career progression of SAS doctors compared to consultants, illustrating that it takes a SAS doctor 18 years to reach the top of their pay grade, year on year developing expertise and specialist knowledge which is often equivalent to that of a consultant.

SAS doctors make up over 12.7 percent of the medical workforce within hospitals in Northern Ireland:

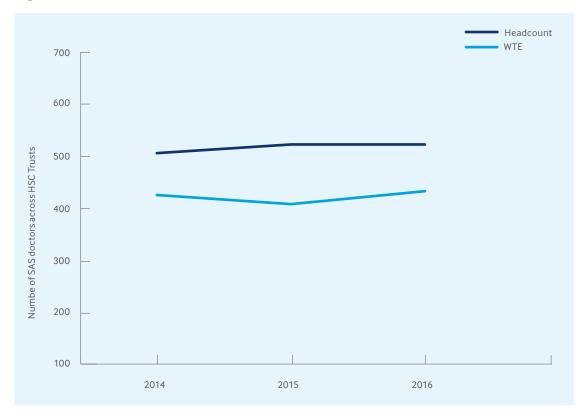
Figure 2. Numbers of SAS Doctors in Northern Ireland

	HSC Board & Regional Services	Belfast HSC Trust	Northern HSC Trust	Southern HSC Trust	Western HSC Trust	South Eastern HSC Trust	
	No. (WTE)	No. (WTE)	No. (WTE)	No. (WTE)	No. (WTE)	No. (WTE)	
Associate Specialist/ Specialty Doctor/ Staff Grade	2 (1.9)	127 (108)	101 (81.4)	120 (103.6)	64 (55.9)	105 (79.6)	
TOTAL	2	127	101	120	64	105	519
Total Hospital Doctors		1693	603	613	530	640	4079
%		7.5%	16.7%	19.6%	12.0%	16.4%	12.7%

Source: DoH NI Workforce Census March 2016

Outlined below is the total number of SAS doctors across all Trusts over a three year period from 2014-2016 including headcount and whole time equivalent (WTE).

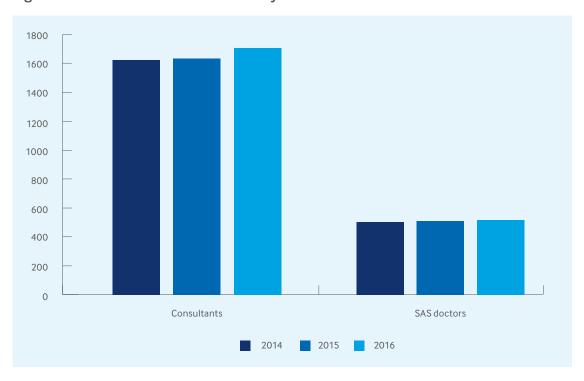
Figure 3. Number of SAS doctors in Northern Ireland (Headcount and WTE 2014-2016)



Source: DoH NI Workforce Census March 2014-2016

The three year trend shows the SAS workforce has increased by 15 doctors over the period from 2014-2016. In comparison, the consultant workforce shows an increase of 86 doctors over the same period.

Figure 4. Consultants and SAS doctors by Headcount



Source: DoH Workforce Census 2014-2016

A comparative analysis of age and gender of SAS doctors during the same period indicates that the SAS workforce is predominantly comprised of females, with at least half of this group preferring to work on a part-time basis. It is also notable that over the trend period there is consistently twice as many female SAS doctors to their male counterparts.

Figure 5. SAS doctors by Age Group (Headcount)

Year	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+	Total
2014	12	70	99	87	81	76	51	23	5	504
2015	12	75	97	83	84	76	57	19	6	509
2016	13	71	94	96	85	72	56	24	8	519

Source: DoH Workforce Census 2014-2016

Figure 6. SAS doctors by Gender and Full-Time / Part-Time (Headcount)

Gender	2014			2015			2016		
	F/T	P/T	Total	F/T	P/T	Total	F/T	P/T	Total
Female	150	180	330	158	182	340	161	188	349
Male	162	12	174	153	14	167	153	17	170

Source: DoH Workforce Census 2014-2016

Challenges

Whilst there are many documents in place articulating a willingness and enthusiasm to provide essential support for SAS doctors, there is a lack of consistency in approach and resources in place. Until these barriers are removed, the aspirations contained in the various documents will remain unfulfilled.

The health and social care system is experiencing a shortage in medical staff across a range of specialties within all Trusts. The lack of medical staff has necessitated the Department of Health initiating an international recruitment campaign. It is likely that the majority of doctors recruited through this campaign will be SAS doctors. It is therefore essential that all new recruits are motivated to stay in Northern Ireland and all Trusts provide enhanced support for training and career development needs.

The transformation agenda proposed by the Minister's vision and the report from the expert panel, recognise the need for new models of care and for ambitious change to continue to provide high quality and safe care for patients. There are many challenges that will intensify the pressure on the financial stability of health and social care in Northern Ireland. Issues such as patterns of disease and disability, medical advances, technology, demographic shifts and unhealthy lifestyle behaviours.

Effective clinical engagement with SAS doctors will be essential and needs to be backed up by institutional resources and support. SAS doctors will play a significant role in these new models of care through leadership and developing innovative solutions, if the right support is put in place.

What is happening for SAS doctors elsewhere in the UK?

In looking to develop recommendations for SAS doctors in Northern Ireland, we undertook a scoping exercise to determine what was happening across the UK. We have outlined briefly below examples of what is happening in England, Scotland and Wales. This initial assessment of what is being provided for SAS doctors across the nations disappointingly leaves Northern Ireland wanting in its provision.

England

There are currently 13 Associate Post Graduate Deans responsible for supporting and co-ordinating the training and development of SAS doctors.

Funding for SAS grade development and for all NHS clinicians is allocated nationally through the multi-professional education and training (MPET) budget, which is now strategically managed by Health Education England (HEE). The funds have been devolved completely to the local Trusts for the SAS tutors to manage.

SAS tutors report that upwards of 70% of SAS doctors are accessing development funding, with some courses being oversubscribed.

Below are examples of SAS doctors who have received funding and the beneficial service developments to their career and workplace.

New ophthalmological service development - Midlands Deanery, PGME

In the Midlands area significant ophthalmological service development was noted due to four colleagues all accessing secondment opportunities to gain skills and start a new local service, which reduced travelling time for patients.

Subspecialist gynaecology service – Midlands Deanery, PGME

A subspecialist gynaecology service was set up and run by a SAS grade doctor as a direct result of skills gained via use of SAS development funding.

NHS Acupuncture Service - Buckinghamshire

SAS development funding helped an Associate Specialist in the Department of Anaesthesia at Wycombe General Hospital to train and accredit as a Medical Acupuncturist with the British Medical Acupuncture Society. He now offers acupuncture for chronic pain patients in his pain clinic.

SAS doctor appointed to Medical Director post

An Associate Specialist in London completed interview courses and a leadership and management course and was subsequently appointed as a Medical Director. He is also an Educational and Clinical Supervisor, SAS tutor and OSCE lead examiner for MFFLM exams and trains trainers thanks to courses provided with development funding.

Dermoscopy – Great Western Hospitals NHS FT

Three SAS doctors in Dermatology used SAS development funding to pay for a 12 week online Dermoscopy course provided by Cardiff University. Dermoscopy is an essential skill in the Dermatology clinic and benefits patient care through early detection of melanomas but also reduces the rate of unnecessary excisions which improves the efficiency of the department. Completing the course enabled one of the doctors to run 2ww skin cancer clinics and become a full member of the MDT.

Wales

The Welsh deanery appointed an Associate Dean for SAS doctors in 2010 to ensure that there are effective methods of supporting CPD for SAS doctors in Wales and to develop and deliver quality management and enhancement.

The Welsh deanery administers two funding rounds for bursaries to further support SAS doctors professional development. They also organise a programme of regular generic training courses for SAS doctors in both north and south Wales.

Since 2009 the Welsh deanery has organised biennial SAS conferences that have provided an opportunity for SAS doctors to network and to learn more about changes taking place within the NHS. They also recognise SAS doctors for their outstanding teaching or innovation as part of the BEST awards and continue to look for alternative quality assurance frameworks to enable SAS doctors to evidence and record their competence and experience. This is undertaken alongside BEST awards for consultants and GPs and in collaboration with BMA awards. Furthermore, whoever is awarded gets a small bursary for their own personal development.

Every two years a training needs analysis survey of SAS doctors is conducted, for which there is an excellent response. With this information, the deanery looks further at the needs of SAS doctors and their professional development.

In addition, SAS tutors have been appointed in all health boards across Wales to provide local advice and support on training. Appraisal training has been provided to many SAS doctors who are now appraisal leads in hospitals and are appraising both consultants and SAS doctors.

Scotland

A SAS managed Educational Network has been set up comprising of Educational Advisors supporting each health board region in Scotland. The leads have formed a national Project Implementation Group (PIG), comprised of the North Postgraduate Dean, SAS Project Lead and Associate Postgraduate Dean, representative of the Scottish Academy of Medical Royal Colleges, representative of the Director of Medical Education's (DME) group, and a representative of the BMA.

There are two SSASC representatives on the project implementation group, and recently a job share appointment has been made to the post of Associate Postgraduate Dean to the SAS development fund. The SAS development fund has been used to support projects such as:

- Insulin Pump secondment
- Autism Diagnosis Observation Schedule (ADOS) course
- MSc in Medical Education
- Train the Endoscopy Trainers course

The Scottish Government confirmed a further £500,000 funding for SAS development from April 2016 to March 2017, and has agreed to extend the funding for 2017-2018.

Northern Ireland

The Southern Trust has been innovative in appointing a SAS lead for appraisal and revalidation, also identifying and providing SAS only training opportunities. Furthermore, with the support of Trust senior management, the Southern Trust has hosted three very successful SAS conferences. Both the Southern and Belfast Trusts have appointed SAS doctors as appraisers enabling them to appraise all groups of doctors including Consultants.

Associate Specialist Grade

A number of developments across the UK have acknowledged the advantages of re-opening the Associate Specialist grade to improve recruitment and retention, and to help ensure the sustainability of suitably qualified and experienced doctors to deliver high quality care for patients.

The following is a snap-shot of developments across the UK:

- South Tees as part of what the Trust call 'Reward Strategy' has agreed to reinstate the Associate Specialist grade on national terms and conditions effective forthwith.
- Torbay and Taunton have agreed to reopen the Associate Specialist grade and have given Trusts the
 discretion to appoint senior hospital doctors subject to the national contractual terms for Associate
 Specialists either through direct appointment or via the personal regrading of Specialty Doctors
 currently employed by the Trust. The agreed policy outlines a new Trust process for regrading Specialty
 Doctors to Associate Specialist Doctors and the circumstances in which this may occur.
- Livewell Southwest CIC, the mental health provider for Plymouth recruitment and regrading to Associate Specialist using a policy very similar to that already agreed in Torbay and Taunton.
- NHS Grampian has submitted a variation order request to the Scottish Government to allow them to re-open the Associate Specialist grade locally, via a two year 'proof of concept' project.

BMA Northern Ireland SASC recommendations

As can be seen above, the other nations across the UK are making headway with maintaining, motivating and supporting this cohort of doctors. There are recruitment and retention challenges across the medical workforce in Northern Ireland, and to remain attractive, we need to offer the necessary support to retain this core group of clinicians. BMA Northern Ireland believes the following recommendations will go some way to achieving this.

1 BMA Northern Ireland SAS committee recommends that each Trust appoints a SAS doctor with specific responsibilities to take the lead for the development of SAS doctors in their Trust. This role should take account of the business objectives of each Trust and be directly responsible to the Medical Director.

The responsibilities undertaken by this senior SAS doctor to include:

- induction of new appointees
- facilitate training and development of SAS doctors for the purpose of revalidation
- liaise with the Responsible Officer on process and completion of appraisal
- support the appraisal process by providing information and advice
- liaise with the medical education department and the learning and development directorate (or equivalent) within each Trust
- establish a SAS doctor forum to share learning with topics identified and delivered by participants
- create a database of all Trust SAS doctors
- develop a communication strategy in line with established Trust policies
- encourage secondment opportunities
- encourage SAS doctors to become mentors
- encourage SAS doctors to become appraisers
- develop a mentoring training programme
- highlight opportunities for specific clinical management or other educational skills courses/ workshops, in areas e.g. leadership training, master classes (including Article 14)
- facilitate and support CESR applications
- provide annual reports to the DoH on the Trust's implementation of the 'Charter for SAS Doctors in Northern Ireland'.

It is essential that this role is accepted as an Additional Responsibility role, and recognised within the incumbent's job plan with a minimum of 2 PAs.

- 2 BMA Northern Ireland SAS committee recommends that each Trust should identify adequate resources to support the work of the SAS Lead to include:
 - office accommodation
 - administrative support
 - training and development budget
 - IT
- 3 BMA Northern Ireland SAS committee recommends that an Associate Postgraduate Dean/Regional Co-ordinator for SAS doctors is appointed and funded by the Department of Health to develop and deliver quality management and enhancement for CPD for SAS doctors on a regional level, avoiding duplication and facilitating the sharing of resources.
 - Implementation of these recommendations will provide numerous benefits for employers:
 - a motivated and engaged SAS workforce by supporting their development in clinical and non-clinical areas (such as leadership, management and training)
 - the provision of a safer, high quality patient care by ensuring that Specialty Doctors maintain their competence and acquire new competences to meet their professional obligations
 - SAS doctors developed to realise their potential and therefore better equipped to meet the needs of service delivery within the Trust
 - evidence of good practice, which will support employers in meeting the requirements of the Department's Controls Assurance Standard – Risk Management
 - the assurance that Specialty Doctors will continue to meet the essential requirements of the GMC through successful revalidation

- SAS doctors sharing their experiences and learning will facilitate an understanding of each other's role, leading to a better integrated service within Trusts
- SAS doctors will provide teaching and learning opportunities to each other.
- 4 BMA Northern Ireland is recommending that the Associate Specialist grade is re-opened subject to the (Northern Ireland) 2008 contractual terms for Associate Specialists. Associate Specialists are senior hospital doctors, responsible to named consultants. BMA members have acknowledged the importance of career development opportunities for doctors in the specialty grade. The option of becoming an Associate Specialist is an important element in the recruitment and retention of these doctors who are essential to the running of high quality patient services.

Conclusion

The existing and emerging challenges will require SAS doctors to continue to play an increasingly significant role in the provision of care. It is now more important than ever that a career structure is established for SAS doctors which is integrated, valued and recognised within medicine.

The role of SAS doctors in the forthcoming transformation as a result of the publication of the Minister's vision, Health and Wellbeing 2026: Delivering Together¹ and the report of the Expert Panel, Systems, Not Structures: Changing health and social care² will become pivotal as change is implemented in the coming years.

The current financial constraints coupled with the increasing demand for services, needs SAS doctors to be significant contributors to the fundamental and major changes required. SAS doctors, working on behalf of patients, can readily identify where improvements to the health service can be made and therefore constructive engagement with them is vital.

A well-motivated SAS doctor, with the requisite planned training will continue to be capable of working at a consistently high level, contributing clinically, educationally, in management, clinical governance, appraisal and innovation. An infrastructure is required with accountability and support to ensure that a SAS doctor role is an attractive role which makes a significant contribution to the delivery of high quality patient care.

² Bengoa, R et al (2016) Systems, Not Structures: Changing health and social care. Expert Panel Report

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