

## Junior doctors committee (JDC) Written report to the ARM 2023

### Overview

#### The fight for full pay restoration

This session, junior doctors across England decided to take a stand after years of pay erosion.

Struggling with heavy workloads, an under-resourced NHS and a cost-of-living crisis triggered by runaway inflation, our members decided it was time to act and demand that their government act, too.

In June 2022, the BMA passed a resolution at its annual representative conference (ARM) calling for doctors' pay to be restored to 2008 values. This followed a similar motion at the junior doctors conference in May. The Government, however, showed no interest in such restoration when it decided to exclude junior doctors from the DDRB-recommended uplift in July. Instead, it stuck to a 2% increase stipulated in a multi-year pay deal that couldn't have predicted the impact of a pandemic or the current global financial situation. This news was met with dismay, as a BMA survey showed that 82% of England-based junior doctor respondents believed the uplift was "completely unacceptable".

After repeated attempts to engage with the health secretary were ignored, JDC made the decision to ask junior doctors in England whether they would be willing to strike in their pursuit of fair pay. The ballot opened on 9 January 2023; by the time it closed in February, it had received a 77% turnout. Of the almost 37,000 votes cast, 98% were in favour of industrial action – the largest ever turnout for a ballot of doctors by the BMA and a record number of junior doctors voting for strike action.

The incredible engagement was testament to the organising efforts of junior doctors across the nation, which were demonstrated again through both rounds of strike action. Along picket lines and at rallies, on social and traditional media, junior doctors made the case for pay restoration. United in a belief that a new deal was not only fair but necessary, members spoke about how under-valuing exhausted doctors in training posed a threat to the future of the NHS itself.

This tremendous show of solidarity has led to negotiations with Government – something which seemed impossible without strike action. Unfortunately, these have not yet produced a deal the BMA could agree to, and JDC is (at the time of writing) taking part in another round of strike action. The committee continues, however, to make the case for a deal that provides junior doctors with what they deserve.

In Scotland, SJDC have also been campaigning for pay restoration and earlier this year held its own ballot for industrial action, which achieved a 71% turnout, with almost 97% of votes cast in favour of strike action. Negotiations with Scottish Government led to an offer of a 14.5% gross pay uplift made across a two-year period of 2022-24 (specifically, 6.5% uplift for this year and an increase from 4.5% to 7.5% backdated for 2022/23). In addition to this, it has proposed to set up a junior doctor pay bargaining review taskforce with the SJDC, with the aim of producing a new system of pay bargaining that can tackle erosion already experienced by junior doctors and prevent it going forward. Scottish junior members have voted to reject this deal and BMA Scotland are currently preparing for a round of IA in July, but SJDC continues to speak with Scottish Government to find a satisfactory resolution so that strike action can still be averted.

The Welsh Government implemented a pay offer that raised the consolidated pay uplift for junior doctors in Wales to 6% for 2022/23 (and included an additional 1.5% one-off payment for those in secondary care). As part of the pay award, the minister for health and social care also provided a commitment to the principle of pay restoration to 2008. Though it was implemented, WJDC (Welsh JDC) rejected this offer and wrote to the minister calling for an above-inflation uplift and a timeline to achieve full pay restoration to prevent a Welsh ballot for junior doctor industrial action.

In response to this letter, WJDC have been invited to pay talks alongside BMA representatives from other secondary

care branches of practice to discuss the 2023/24 pay award and our shared commitment to restoring pay. These talks began on 19 April and are currently ongoing.

In addition to this, a concerted recruitment drive has provided WJDC with more than 75 signed-up pay activists. These individuals will be instrumental in building teams and networks in their workplaces and have already been granted the opportunity to attend a 'Getting Strike Ready' training programme throughout April.

In Northern Ireland, NIJDC (Northern Ireland JDC) commenced a programme of work to directly engage with its wider membership, find out its junior doctors' priorities, and what action these members wanted their union to take regarding pay and pensions. The conclusions from these conversations were clear: junior doctors in Northern Ireland feel undervalued, underpaid, overworked and lacking in training opportunities. In response to these findings, NIJDC will commence a pay and conditions campaign, which will include writing to the Permanent Secretary (reiterating the call for full pay restoration that was made in evidence submitted to the DDRB), lobbying stakeholders and calling for political parties to both properly recognise junior doctors and take responsibility for the crisis facing the health service. NIJDC will also issue a survey to junior doctor BMA members to gather more views on key issues (such as pay, conditions and training), as well as their thoughts on industrial action.

Across the UK, junior doctors have asked that their work be recognised and stated, quite clearly, that they are not worth more than a quarter less than their 2008/09 counterparts. The work continues, but we believe in the power of our members, and our union, and that together we can win our fight for proper pay.

### Proper pay for extra-contractual work

Following the success of the consultants in this area, BMA published a junior doctor locum rate card in February 2023. These cards were eventually rolled out in each nation, making this a truly UK-wide initiative, with the values being updated for inflation in April this year. The resources provide guidance for those on the 2002 and 2016 contracts, advising doctors on the value of their extracontractual work.

### Improving conditions

While there has been a significant focus on pay this session, we are conscious that this is not the only issue troubling our members. At the recent junior doctors conference, we passed resolutions on a range of matters, from the rising cost of training to safe medical staffing to the provision of facilities including appropriate office space.

We have celebrated wins around terms and conditions, including the extension of the section 1 pay protection (brought in after the 2016 contract), which was previously due to end in March 2023 but will now last through to 2025. In addition to this, we have secured contractual timelines by which employers will need to implement occupational health recommendations (or else provide reasoning why they have not done this).

We are also working on further improving conditions for doctors on a number of fronts, such as preparing guidance for pregnant doctors, and are carrying out work on night duties and safe staffing.

This session we continued to support greater flexibility in training, both in terms of trainees being able to train LTFT (less than full time) and out of programme activities (whether it is for research, activity counting towards CCT or other activities). We regularly feed the need for such flexibility back to HEE and stakeholders as part of our continuous engagement. This includes via COPMeD (the Conference of Post Medical Deans Conference) and MDRS (the Medical and Dental Recruitment Selection groups).

Over the past year we also secured an agreement by HEE that LTFT training would be rolled out across all specialties in 2023 and made available to all trainees. These changes were enshrined in Gold Guide 9, which was published in August 2022. Following up on this we are currently building on recent successes and compiling a BMA submission for Gold Guide 10.

Our work has also provided all trainees with the ability to request an IDT (inter-deanery transfer). From August 2022 the new category 5 was introduced: a 'catch all' category that does not require a trainee to meet any of the previous requirements for requesting an IDT, significantly improving the previous system.

In Northern Ireland, the NIJDC chair represents trainees on the BMA/Department of Health HR forum, and discussions have commenced to look at whether a more formal joint negotiating forum can be established to include employers at the meetings. NIJDC also regularly meets with NIMDTA to discuss a variety of education and training issues, and has representation on a study leave working group set up to review current policy, budget and the move to a fully online application process by August 2023.

There have been several breakthroughs in Wales, including making an agreement with HEIW (Health Education and Improvement Wales) to roll over any unspent funds in an individual trainee's training budget to the next training year, and securing greater flexibility within the Welsh LTFT training policy. A Welsh Fatigue and Facilities

Charter implementation toolkit was launched in January 2023 (with the purpose of enabling health boards to implement said charter). WJDC also continues to work with HEIW to review the Welsh trainee travel and relocation expenses policy, advocating for changes to ensure doctors aren't left out of pocket.

In addition to this, WJDC acts as a key stakeholder on the project board for the implementation of NWSSP (NHS Wales Shared Services Partnership) as the single lead employer for hospital-based trainees in Wales. The committee uses its position to advocate for a smooth transition process for these doctors.

In Scotland, SJDC continues (following the publication of its [well-being document](#)) to work with Scottish Government, NHS Scotland employers, and NES (NHS Education for Scotland) on the need to address fatigue and wellbeing for its junior doctors. A joint agreement was reached in a previous session (February 2022) to implement a maximum number of long shifts for junior doctors. The latest report from Scottish Government is that the implementation deadline for February 2023 has been met by all NHS Boards in Scotland for junior doctor rotas. This was a key ask of the BMA Scotland's wellbeing report.

SJDC meet with NES on a regular basis to discuss key education and training matters for junior doctors in Scotland. This has included monitoring the continuing impact of Covid on training and career progression, flexible portfolio training, rotas in advance, educational approval of rotas and recruitment.

The committee continues to work with Scottish Government and NHS Scotland boards to improve the rota monitoring process and ensure the joint monitoring guidance for employers is adhered to. SJDC issues snap rota surveys, sharing these results with MSG (Management Steering Group – Scottish Government and NHS Scotland employer representatives). The committee also uses a rota reporting tool to get real-time data from members who are having issues.

The BMA continues to represent our members in banding appeals, winning our members the money they're owed and, where the appeals work as intended, highlighting problem areas in order to act as a catalyst for change.

## **Looking forward**

There is of course much to be done when it comes to improving the working lives of junior doctors. But while we understand the complexity of much that lies ahead, we move forward with confidence, having witnessed the extraordinary efforts of our members this past session. Junior doctors have come together to call for better pay, better conditions, and better treatment. They have made their voices heard on the wards and in conference, and all across the UK. As we look forward, we do so with hope that next session will bring about even greater breakthroughs for our members.

**Robert Laurensen & Vivek Trivedi**

**Co-Chairs, UKJDC**

[Junior doctors committee UK overview](#)