Job planning with consultants on different terms and conditions

**Introduction**

Many NHS organisations will be required to manage job planning in 'mixed economy' departments that have consultants who have remained on the 'old' contract working alongside those who have taken up the 2003 contract. Furthermore, all new appointments will be on the 2003 contract.

The following section is intended to assist in the process of integrating job planning in this 'mixed economy'. As this section will show, the differences between the 'old' and 'new' job planning processes are not significant and therefore should not prove a barrier to an integrated local process.

**Job planning under the 'old' (pre-2003) contract**

*Health Circular HC (90)16* remains extant for consultants on the old contract. It outlines the requirement and process for an annual job plan review. Contractual duties of consultants on the old contract are outlined in Paragraph 30c (and related paragraphs) of the Hospital Medical and Dental Staff & Doctors in Public Health Medicine and the Community Health Service Terms and Conditions of Service (September 2002).

The job planning process described within this circular is updated and refreshed by the new guidance contained within the 2003 document *Consultant job planning - standards of best practice*, which applies to all consultants, whether on the old or new contract, and irrespective of whether or not they intend to apply for a clinical excellence award.

Therefore, the job planning process for all consultants should follow the same principles and should produce broadly the same outcome, that is to say a job plan that covers:

- the consultant’s main duties and responsibilities
- scheduling of commitments
- personal objectives, including any continuing medical education and training, and their relationship with wider service objectives
- the support needed in fulfilling the job plan.

In addition to the above guidance on job planning, new guidance concerning private practice is contained within the 2003 jointly agreed guidance ‘A code of conduct for private practice: Recommended standards of practice for NHS consultants.’ (see Reference manual) Adherence to the standards in the code forms part of the eligibility criteria for clinical excellence awards, and applies to consultants on both the 2003 and the old contract.

**Timetabling of activities**

The two contracts contain different arrangements for the scheduling and timetabling of activities but this should not impact adversely upon the job planning process. A full-time commitment for a consultant on the 2003 contract is 10 programmed activities (PAs). For consultants remaining on the old contract, both whole-time and maximum part-time consultants are expected to devote substantially the whole of their professional time to their duties in the NHS. The minimum work commitment for a maximum part-time consultant is defined as the equivalent of ten notional half days (NHDS). See Paragraph 13 of the Terms and Conditions of Service (September 2002).
A NHD is defined as a period of three and a half hours, flexibly worked; a PA has a nominal timetable value of four hours. It is important to remember, however, that direct clinical care (DCC) PAs include an element for administration activities directly related to the DCC work, for example multi-disciplinary meetings about direct patient care, referrals and notes. Under the old contract, these elements are accounted for under the heading of flexible commitments. Therefore, it would be misleading to equate an NHD fixed commitment with a DCC PA in terms of activity, as the two do not correspond exactly. Similarly, supporting professional activity (SPA) PAs do not encompass all of the activities accounted for within the definition of a flexible commitment.

Neither the old nor the 2003 contract are 'hours based' contracts. Rather they both reflect an expectation that contractual duties will be undertaken in a spirit of professional flexibility with regard to time, location, content and duration of agreed activities. In practice the contractual distinctions between 'PAs' and 'NHDs' or 'sessions' should not have the effect of introducing restrictions and limitations on flexibility that did not previously exist.

How to transfer from 'old' to 'new'

A consultant on the old contract retains the right to request transfer to the 2003 contract terms and conditions of service at any time. Transfer is subject to agreeing a job plan on a prospective basis. The commencement date of the new contract is a matter to be agreed locally between the consultant and the employing organisation. The right to back pay for a consultant requesting transfer to the 2003 contract expired on 31st March 2004.