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Job Planning for Consultant Clinical Academics

Introduction

This updated guidance outlines the steps that may be taken in order to arrive at an agreed job plan for consultant clinical academics.

'Consultant clinical academics' are consultants employed by a medical or dental school, or by a research organisation such as the Medical Research Council (usually through the University). Their contract includes a commitment to undertake NHS duties, either via an honorary contract with the NHS, or less commonly through an "A+B" appointment. For the purposes of this guidance we shall refer to the substantive employer as "the University".

The academic and clinical components of the consultant clinical academic's job are of equal importance and together make up the integrated workload. The integrated commitments require the consultant clinical academic to give equal priority to University and NHS activity within a contractual framework that supports flexible working practices.

Job planning for consultant clinical academics should apply the Follett principles; both the University and NHS employer should work in partnership to agree an integrated job plan with the consultant. In practice this means job planning for consultant clinical academics is likely to borrow heavily from the work done in setting up procedures for joint appraisal (though job planning and appraisal procedures will remain formally separate).

Much of this guidance is intended to help individual consultants prepare his/her job plan for discussion with the relevant medical and academic managers. However, there are specific actions that need to be taken by those managers and these have been identified at the appropriate stage in the process.

The job plan should cover:

- The consultant's main duties and responsibilities to both the NHS and the University and the agreed Programmed Activities allocated for each
- The times and locations at which these activities are scheduled to take place
- The accountability arrangements, making clear to which sector and manager the consultant is professionally and managerially responsible for each task
- Agreed personal objectives and their relationship to both NHS and University objectives
- The support and facilities needed to fulfil the job plan

In developing the job plan the following should be borne in mind:

- It is a prospective agreement setting out duties, responsibilities and objectives for the coming year
- It should cover all aspects of a consultant's professional practice (including all paid work for other academic and commercial organisations)
- The previous year's job plan may be a useful reference point from which to develop the new job plan
- The plan may be wholly or partly team based
- It should include NHS objectives as well as University objectives
- It should include personal objectives
- Resources and support required are agreed and stated
- The process is separate from, but linked to, appraisal

Who is involved?

A number of people can be involved in the job planning process. Those most centrally involved are likely to be the:

Consultant - or team of consultants for part of the process (as each consultant will have their own personal objectives and personal schedule). Consultant clinical academics should be included in any relevant team job planning process.

NHS Medical Manager - e.g. Lead Clinician, Clinical Director or Medical Director.

NHS Chief Executive - although the job plan is an agreement between the employer and the consultant, in practice detailed discussions will take place between the consultant and their medical

manager. The Chief Executive's key responsibility is to ensure that all consultants have agreed job plans as well as to sign them off.

Academic Manager - e.g. Head of Department or whoever is responsible for the academic side of the appraisal process.

Senior Academic Manager - this is likely to be the Dean of the medical school or someone else in a senior position responsible for ensuring the proper use of resources. The senior academic manager is unlikely to participate in job planning for the vast majority of clinical academics, but, like the Trust Chief Executive, they will have the responsibility to ensure that all consultants have agreed job plans.

Job plan review

A job plan review should take place at least annually. Much of the information required for the job plan review is the same as or similar to that required for the appraisal process. In addition, one outcome of the appraisal process is a personal development plan. It may be helpful, therefore, to ensure that the two processes occur as close together in time as possible, with appraisal preceding job planning. If there is a significant change in any aspect of the job plan during the year it may be necessary to have an interim job plan review.

The purpose of the review is to:

- Consider what has affected the job plan
- Consider progress against the agreed objectives
- Agree any changes to duties and responsibilities
- Agree a plan for achieving personal objectives
- Agree the support and facilities required from both employers
- Review the relationship with other paid work, including any private practice

Information checklist

The information needed to inform job planning will differ between specialties and even between consultants in the same specialty. It is not possible, therefore, to give a definitive list of what might be required. The different parties to the job planning process also require different sets of information. The following checklist provides suggestions about the sort of information required. The list is by no means exhaustive, nor is every item mentioned necessary. The Consultant Job Planning Toolkit contains detailed guidance and may be found at <http://www.wise.nhs.uk/cjpt/menu.htm>.

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- Last year's job plan (or if any of the parties believes that there might be need for significant change in the current job plan, a reliable and representative diary kept over an appropriate number of weeks)
- Personal development plan

NHS work

- List of main clinical responsibilities for the NHS
- Workload figures broken down in a meaningful way
- Timetable of private practice commitments, if any
- List and scheduling of any fee paying services, if any
- Undergraduate and Postgraduate teaching commitments undertaken in NHS time
- Research
- CPD/CME requirements
- List of other commitments, duties and responsibilities for NHS employers
- List of commitments, duties and activities for other relevant organisations such as work for the BMA, the Healthcare Commission, GMC, and Royal Colleges.
- Clinical audit and clinical governance issues to be addressed
- Support provided by the organisation and any further support required
- Ideas for improvements to service quality, range or performance
- Thoughts on resolution of blockages to efficient service delivery

Academic work

- Research activities, including published, submitted and conference papers
- Current research activities
- Proposed research and plans for obtaining funding. This should indicate which local resources (e.g. lab time) would be necessary
- Courses lectured on, including other commitments (e.g. tutorial attendance, marking, etc)
- Course administration, including examination boards and timetable support
- Research student commitments, including supervision
- Examination/moderation of external students, including PhD vivas
- Other Department/school/University administration
- Duties around TQA and RAE assessment
- Details of any paid work, including external lecturing, paid consultancy, commercial activities and work for other organisations
- University management, including meetings and committee work

- QAA/GMC visits and associated work
- Attending/organising conferences

Medical manager

- Quantity and quality targets for the directorate and performance against such targets by the team and individual in the previous year
- Knowledge of the relevant priorities within the local delivery plan
- Clinical postgraduate commitments
- Changes in services being required of, or offered by, the directorate
- Clinical audit and clinical governance issues affecting the directorate
- Knowledge of the resource base of the directorate including numbers of staff, changes in skill mix and those services, space and equipment available
- Understanding of existing and new initiatives within the directorate or NHS organisation

Academic manager

- Research plans and targets for RAE achievement. This should make clear what is expected of the individual clinician
- Undergraduate teaching programme, including course alterations and proposed new courses
- Review of the undergraduate and postgraduate feedback on teaching/supervision
- Knowledge of the available resources, including postgraduate student numbers and plans on supplementing research assistance
- Understanding of existing and new initiatives within the University

Both managers

- Details of joint working arrangements and an assessment of what they have achieved and how they might be improved

In addition, the participants may require information from other sources in order to complete the job plan accurately. Such information might include:

- Activities for other employers (e.g. lecturing commitments to other universities or clinical work done for other NHS organisations)
- Changes in practices and/or services of other directorates or other providers

- National clinical audit or clinical governance issues
- Changes in the health provision requirements of the local health community
- Information from tertiary centres regarding referrals
- Guidance from the Royal Colleges, particularly regarding workload and changes in clinical practice
- Changes within the University
- The needs of doctors in training

Before the discussion

If the job planning process is to have meaning and to be helpful to both the consultant and the employing organisations, some preparatory work is necessary by all parties. If the job planning discussion takes place immediately after the annual appraisal then much of the information can be shared. As the personal development plan will have been agreed at the appraisal session, it can inform the job planning discussion.

Preparing the job plan

Sufficient information should now be available to prepare a draft job plan. Broadly, this will identify both the individual commitments to both organisations and agreed objectives for the coming year. From the employers perspective it should arrive at a plan of work that makes clear their joint expectations of the consultant. It needs to include the following elements:

- The number and type of Programmed Activities, timing, content and where they will take place
- Academic teaching commitments
- Academic research agenda, including any time employers agree should be regarded as protected research time
- On-call commitments (if any) and an assessment of the average unpredictable emergency work associated with on-call duties, subject to the limits on recognition for such work as set out in Schedule 5 of the Terms and Conditions of Service
- Commitments to both employers that do not occur on a regular, weekly basis
- Any additional duties for either or both employers
- Any commitments to other organisations, including details of any payments made by those organisations
- The consultants personal objectives
- The support required to undertake agreed activities that is already provided by either organisation
- Any additional support required to fulfil additional activities

Allocation of Programmed Activities

All duties and responsibilities should be incorporated within Programmed Activities in the job plan. A full-time consultant clinical academic will normally be contracted for a total of 10 Programmed Activities per week. Consultants may agree to undertake additional Programmed Activities if requested to do so by either or both employer(s).

Activities should be included in a work schedule that will normally cover a week, or a number of weeks. Activities that take place at irregular times, such as research, may need to be annualised. Some activities, such as research, may be undertaken in a flexible way. Unpredictable emergency work arising from on-call duties should be treated as counting towards your Programmed Activities, subject to the limits on recognition for such work as set out in Schedule 5 of the Terms and Conditions of Service.

There are likely to be several elements in a consultant clinical academic job plan:

- Direct Clinical Care (DCC) including medical outpatient clinics where patients are treated as part of their ongoing care with students in attendance
- Supporting Professional Activities (SPA)
- Additional NHS responsibilities (e.g. chairing committees)
- External duties
- Academic activity (education, research and management responsibilities).

Private practice, where undertaken, should be reflected within the job plan

With regard to activities that would contribute to the calculation of SPA Programmed Activities, there should be agreement as to the proportion of activity attributable to NHS duties. The following duties may be incorporated by agreement:

- Audit
- CPD activity
- Teaching activity
- Research

The job planning meeting

It is important that all parties allow sufficient, uninterrupted time to consider a draft job plan. It is also desirable that sufficient time has been allowed to prepare for the meeting and that all relevant information has been collated.

All parties should make every possible effort to agree job plans. In particular, it is important that the NHS and academic managers draw up any institution level agreements *prior* to the job planning process. This would include agreements on the clinical teaching of undergraduates, and on issues around how much time in NHS Programmed Activities (if any) can be allowed for research activities.

In the rare circumstances where a consultant and one of the employers, or the University and the NHS employer, fail to reach agreement on the content of a job plan they should follow local procedures for the resolution of grievances or differences, including any local mediation procedure. Such disagreements may occur during the initial job planning process or at a job plan review. For the individual consultant, these procedures culminate in a right of appeal, the terms of which are set out in Annex B of the Honorary Consultant Contract (England) 2003.

Once the job plan has been agreed, a copy should be sent to the Chief Executive of the NHS organisation and the relevant Dean (or other senior academic manager) for formal ratification and a copy retained by all three parties.