

Job descriptions, job plans and person specifications

Guidance for approving specialty doctors posts



Contents

Introduction
Job descriptions
Secretarial support/IT/office facilities, medical audit, CPD1
Revalidation1
Career progression1
Department2
Workload2
Supervision2
Time off in lieu2
Mentoring2
Job plans2
Working week2
Programmed activity3
Premium time3
Timetable3
On-call duties3
Additional programmed activities4
Person specification
Entry criteria4
RCP criteria for approving job descriptions, job plans and person specifications
Useful resources

Introduction

The guide is designed to help approve job descriptions and job plans for specialty doctor position. The Royal College of Physicians (RCP) aims to speed up the approval process by asking you to submit a job description against criteria in the *job description review form* (available to download on the RCP website) to ensure that you have included all the essential elements prior to sending the job description to your regional office for approval.

The specialty doctor grade was introduced on 1 April 2008. The specialty doctors have at least four years postgraduate experience, two of which are in their chosen specialty. This means that doctors can move into these posts at various levels of experience and seniority, as well as gaining experience and promotion within the grade itself.

Job descriptions

A job description should include:

Secretarial/IT/office facilities, medical audit and CPD

- A commitment to secretarial support and an adequately equipped office, including IT facilities.
- A statement on expectations regarding medical audit.
- A statement on expectations for continuing professional development (CPD).

A suitable form of wording is:

"The Trust supports the requirements for continuing professional development as laid down by the Royal College of Physicians and is committed to providing time and financial support for these activities."

Revalidation

The RCP specifies the supporting information requirements of revalidation for physicians and trusts should ensure that they provide the organisational data required by doctors as part of that supporting information. A suitable form of wording is:

"The Trust has the required arrangements in place, as laid down by the Royal College of Physicians, to ensure that all doctors have an annual appraisal with a trained appraiser and supports doctors going through the revalidation process."

Career progression

A suitable form of wording is:

"The Trust will ensure that the specialty doctors have the support needed to develop skills, experience and responsibilities to enable them to meet the requirements of threshold one and two, so they can progress in their career."

A description of the department/directorate

A list of colleagues' (consultants and SAS doctors) names and titles. The junior staff that will be available to support the appointee should be clearly stated.

Workload figures

Workload figures should be provided. Potential appointees like to have some idea of the inpatient and outpatient workload (new and follow-up) of the department they will be joining, and the expectations of the personal workload expected.

Supervision

In the interest of patient safety, all NHS staff is subject to some form of supervision, but there is no contractual requirement for specialty doctors to be supervised by consultants. In practice, the level of supervision, if any is required, will depend on a number of factors, including personal competence and agreed accountability arrangements for all aspects of the role. The level and mechanism of supervision should be explicit. Usually, the supervision is provided by a single named consultant.

Time off in lieu

There are concerns about doctors not being allowed time off in lieu (such as for weekend working), and the Trust should address rest requirements, particularly for new specialty doctors.

Mentoring

The job description should always include a reference to information about access to mentoring for newly appointed specialty doctor.

The RCP believes that every newly appointed specialty doctor should be offered a mentoring opportunity. The RCP is not prescriptive about the form this must take, as it may vary by trust or specialty but does expect that the mentoring arrangements for the person who is recommended for appointment at the committee should be discussed and agreed by the committee as part of its decision making process.

Job plans

In considering job planning regional advisers should refer to the publication 'A UK guide to job planning for specialty doctors and associate specialists November 2012'. The job plan of a SAS physician employed over threshold 2 should ideally mirror that of a consultant.

Working week

A standard full-time working week will be based on a job plan containing ten programmed activities.

Programmed activity

Programmed activity (PA) means a scheduled period, normally equivalent to four hours (which may be equated to three hours in premium time), during which a doctor undertakes contractual and consequential services.

Premium time

Any programmed activity undertaken outside of the hours 7am to 7pm, Monday to Friday, and all of Saturday and Sunday, and any statutory or public holiday, is regarded as taking place in 'premium time'. This means that a programmed activity at these times lasts only three hours instead of four hours.

Timetable

The timetable should provide sufficient breadth and depth of clinical work and relevant professional activities to enable the specialty doctor to achieve and maintain relevant competencies and develop as a clinician.

There should be a sample weekly timetable that takes account of the programmed activities outlined below and is broken down into AM and PM sessions with timings.

- 1. Direct clinical care (DCC): DCC is work that directly relates to the prevention, diagnosis or treatment of illness.
- 2. Supporting professional activities (SPAs): SPAs are activities that underpin DCC. They may include but are not limited to continuing professional development, audit, local clinical governance activities, training, formal teaching, job planning, appraisal and research. The terms and conditions for doctors on the specialty doctor contract state there should be a minimum of one SPA for full time doctors (In Wales, good practice guidance produced by the Welsh Assembly Government advocates 20% of time for SPAs for all SAS doctors), however additional time may be required provided the need is established in the job plan. The minimum requirement for revalidation only would be at least 1 SPA, which would therefore require that no teaching/trainee supervision/research/department management is involved in the post, if there is only one "core" SPA. The specialty doctor after progressing through threshold one, needs to demonstrate evidence for teaching/trainee supervision/research/department management, so will need more than "one" core SPA. The specialty doctor employed above threshold two should have a minimum of 2 SPAs. This is in line with BMA recommendations. Part-time SAS doctors have a contractual right to a minimum of 1 SPA as per full-timers.
- 3. Additional NHS Responsibilities: Additional NHS Responsibilities are special responsibilities within the employing organisation not undertaken by the generality of doctors, which are agreed between the doctor and the employer and which cannot be absorbed in the time set aside for supporting professional activities. These could include, for example being a clinical manager, clinical governance lead, clinical audit lead or college tutor.

4. External duties: External duties is work that is not included in the definitions of 'Direct Clinical Care', 'Supporting Professional Activities' and 'Additional NHS Responsibilities', and not included within the definition of Fee Paying Services or Private Professional Services, but are undertaken as part of the job plan, prospectively agreed between the doctor and the employing organisation without causing undue loss of clinical time. This category is rarely used and only where there is a substantial time commitment. External Duties might include: trade union duties, reasonable amount of work for the Royal Colleges or Government Departments in the interests of the wider NHS.

On-call duties

The frequency of on-call commitments should be clearly stated. It would be helpful to include information on the number of patients that a specialty doctor should expect to see and information on the times that he or she should expect to be in the hospital. If acute on-take duties are part of the job description, there must be a specific commitment to post take ward rounds.

Additional programmed activities

The terms and conditions provide flexibility for employers and specialty doctor to agree to contract for additional PAs for a variety of purposes, although a specialty doctor cannot be compelled to agree to a contract containing more than ten PAs.

Person specification

There should be a person specification detailing the essential and desirable qualifications, skills and experience required to perform the job.

Entry criteria to the specialty doctor grade

A doctor appointed to this grade shall have

- Full registration with the General Medical Council and
- Completed at least four years' full-time postgraduate training (or its equivalent gained on a parttime or flexible basis) at least two of which will be in a specialty training programme in a relevant specialty or as a fixed term specialty trainee in a relevant specialty; or
- Equivalent experience and competencies.

RCP criteria for approving job descriptions, job plans and person specifications

Check	Item	
1	Inclusion of a job description that includes a job plan and person specification	
Job description		
2	A commitment to secretarial support and an adequately equipped office, including information technology (IT) facilities	
3	A statement on expectations regarding medical audit	
4	A statement on expectations for continuing professional development (CPD).	
5	A statement on commitment to revalidation.	
6	A statement on commitment to career progression.	
7	A description of the department/directorate (a list of colleagues' names and titles).	
8	Workload figures are included, e.g.	
	 Inpatient and outpatient workload (new and follow-up) 	
	 Expectations of the personal workload. 	
9	A statement about supervision.	
10	A statement that there will be consideration of time off in lieu (such as for weekend	
10	working).	
11	A reference to information about access to mentoring for newly appointed specialty doctors	
	(job descriptions should always include this).	
Job plans		
12	A sample weekly timetable that takes account of the programmed activities (PAs) and is broken down into AM and PM sessions with timings.	
13	A minimum of one SPA for full time doctors in England and a minimum of 2 SPAs for full time doctors in Wales (good practice guidance produced by the Welsh Assembly Government advocates 20% of time for SPAs for all SAS doctors). However, additional time may be required provided the need is established in the job plan. The RCP strongly supports the BMA recommendation that the specialty doctor employed over threshold 2 should have a minimum of 2 SPAs. Part-time SAS doctors have a contractual right to a minimum of 1 SPA as per full-timers.	
14	The frequency of on-call commitments should be clearly stated.	
Person specification		
15	Full registration with the General Medical Council	
16	Completed at least four years' full-time postgraduate training (or its equivalent gained on a part-time or flexible basis) at least two of which will be in a specialty training programme in a relevant specialty or as a fixed term specialty trainee in a relevant specialty; or Equivalent	
	experience and competencies.	

Useful resources

- 1. Employing and supporting specialty doctors: A guide to good practice April 2008
- 2. Terms and Conditions of Service Specialty Doctor (England) 2008 Version 4 April 2018
- 3. Terms and Conditions of Service Specialty Doctors (Wales)
- 4. Specialty Doctor Terms and Conditions of Service (Northern Ireland) 2008
- 5. A UK guide to job planning for specialty doctors and associate specialists November 2012
- 6. A charter for staff and associate specialist and specialty doctors 2014
- 7. SAS doctor development February 2017

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