

NHS LANARKSHIRE BOARD MEETING

25 JULY 2007

MODERNISING MEDICAL CAREERS

- The Board is asked to note the position to date
- The Board is asked to note the risks identified

1. Current Position – NHS Scotland

(a) Foundation Training

All Posts (FY1 and FY2) are filled.

(b) Specialty Training

ST Posts	100% filled	
FTSTA	81% filled	This is changing daily as some FTSTA offers are taking up ST posts in England

114 FTSTA posts vacant in Scotland, 75 of these are in the West Deanery. This includes some deferred posts.

(c) Individuals without job offers 07/08/2007

East Deanery	43	
North Deanery	70	
South East Deanery	57	
West Deanery	256	(48 in NHSL)

These numbers need to be confirmed as they include people not working in Scotland.

There are still 2,000-2,500 jobs in England to be offered.

(d) NES have improved the position considerably with regard to documentation for applications; with only 28 files yet to be forwarded to NHS Lanarkshire Medical Staffing.

2. Recruitment

NHS Scotland has completed the interviewing process and is currently offering jobs to successful candidates. This is for both the Specialty Training (ST) Posts and the Fixed Term Specialty Training Appointments (FTSTA). By the end of this week NES will have completed this and will send each Board area a list of posts that have not been filled.

We believe that up to 40% of training jobs in Scotland have been filled with individuals who do not have a Scottish postcode. The exact numbers have yet to be finalised.

Each Board is required to identify any gaps not filled with ST or FTSTAs and recruit to these gaps.

Where these gaps are in recognised NES funded training posts the Boards are to offer a three-month contract to appropriately qualified individuals, through a recruitment process locally determined. These are called Locum Appointment Service posts (LAS).

During August NES will advertise nationally for these gap posts. These will be for a nine-month duration starting from 1 November 2007.

There is a group of doctors that are currently in recognised training posts who do not have an offer of a job for 1 August 2007. The Cabinet Secretary has instructed Boards to offer these doctors a new contract for up to three months, or until they get a job offer, whichever is the sooner.

It is not clear where the funding for these posts will come from.

In NHS Lanarkshire we have identified all those individuals who do not have an offer of a job for 1 August and also met the criteria. We are aiming to use this cohort to fill any vacant posts and also offer suitable individuals any other posts such as health Board funded posts.

We are aware of 48 doctors who do not have job offers and whilst we will make offers to some, there will be others that we are obliged to employ for up to three months, which will result in some clinical specialties having a surfeit of doctors.

We aim to minimise the financial impact by offering contracts for specific jobs, for example, 9-5 with no pay banding, jobs in areas of high clinical demand (if the individual has the appropriate skills) and for any gaps such as maternity leave.

3. Medical Staffing Issues

The medical staffing department have still not received the names of some individuals starting work on 1 August. This is improving daily, as of 18 July 2007, there are 28 applications yet to be confirmed.

This obviously causes problems with undertaking regular health and security checks and also prevents us issuing formal contracts.

It is also causing difficulty with designing rotas for 1 August, as without names and applications it is difficult to make an assessment of experience and skills.

4. Risks

1. Service Continuity

Failure to fill ST and FTSTA posts appears to be a low risk with current indications. However, the lack of information means that the risk of a poor skill mix remains high.

Induction programmes have been developed for each site and specialty for the week of the 1 August. Consultant staff, HECT and senior nursing staff have all contributed to service continuity at this time

2. Financial

The source of funding for the commitment made by the Cabinet Secretary to offer doctors in training posts a three-month contract remains uncertain.

3. Human Resources

There is a risk of doctors not having formal contracts issued by their starting date.

Whilst all pre-employment checks will be undertaken as timeously as possible this may be after an individual's starting date.

4. Mobile Workforce

England has yet to complete the process of interviewing and offering posts. This may not be complete before the end of October. There is therefore a risk that some of our workforce leave soon after 1 August if, for example, offered an alternative training post in England.

Some individuals taking up posts on 1 August in NHS Lanarkshire are being required to give three-month notice to their current employer. We will aim to fill these gaps with those of our doctors who do not yet have jobs.

England have also offered jobs for the 1st August, but do not wish individuals to start until September or October, but expect Scotland to keep them in jobs to secure continuity of employment.

DR A GRAHAM
MEDICAL DIRECTOR

16 July 2007