

## ANNUAL JOB PLAN GUIDANCE FOR CONSULTANTS AND SAS DOCTORS

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### 1. **BACKGROUND**

- 1.1 This guidance has been created to aid Consultants and SAS Doctors to contribute to and fulfil their contractual obligation to undertake an annual job plan review.

This guidance should be read in conjunction with the Doctor's Terms and Conditions of Service, namely:

- Terms and Conditions of Service for Hospital Medical, Dental and Public Health Medicine Consultants – The Consultant Contract 2004.
- Terms and Conditions of Service Specialist Doctor in Scotland October 2022.
- Terms and Conditions of Service Specialty Doctor in Scotland October 2022.
- Terms and Conditions of Service – Speciality Doctor (Scotland) 2008.
- Terms and Conditions of Service – Associate Specialists (Scotland) 2008.
- Pre-2008 associate specialist, staff grade, senior clinical medical officer, clinical medical officer, hospital practitioner)

The following appendices are also provided to support the completion of the job plan:

Appendix A: Job Plan Guidance

Appendix B: eJob Plan Complete User Guidance

Appendix C: HRMDS Changing a Contract

The Allocate eJob Plan Complete User Guidance provides step by step instructions and video training guides to support you in using the system.

In addition BMA Guidance is also available at <https://www.bma.org.uk/pay-and-contracts/job-planning/job-planning-process/an-overview-of-job-planning>.

- 1.2 The national guidance for Consultants and SAS Doctors defines job planning as “A prospective agreement that sets out a Consultant / SAS Doctor’s duties, responsibilities and objectives for the coming year. It should cover all aspects of a Consultant / SAS Doctor’s professional practice including clinical work, teaching, research, education and managerial responsibilities. It should provide a clear schedule of commitments. It should include personal objectives, including details of their link to wider service objectives, as well as detailed of the support required by the Consultant / SAS Doctor to fulfil the job plan”.
- 1.3 Where a Consultant/SAS Doctor holds joint appointments in more than one Health Board, the job planning process should be linked where possible with the Lead employer undertaking the job plan. Where there is a joint job plan a copy of it should be shared with each employer.

Unfortunately, job plans for separate Boards cannot be shared in the NHS Lanarkshire system. If a Consultant has completed their job plan at another Board, they should send a copy via HR Service Now to HRMDS to ensure the job plan is confirmed and filed in the individual’s personnel file.

- 1.4 The Terms and Conditions for the 2004 Consultant Contract and the 2022 SAS contract stipulate that job planning is one of the key requirements for pay progression to be applied.

It should be noted that SAS Doctors who have chosen not to transfer to the New Conditions of Service (2008 or 2022) are still expected to participate in a job plan review and the principles outlined in this document should be applied.

## **2. TEAM JOB PLANNING /JOB PLAN REVIEW: PAPERWORK TIMESCALES AND PAY PROGRESSION**

- 2.1 The Annual Job Plan Review should normally take place between November and February each year, as it is important that the process be concluded in time to inform the Payroll Department on pay progression for those Doctors pay progression applies to.

The job planning review process involves a review of the previous year job plan against the objectives set. Subsequently a prospective job plan will be agreed for the year ahead.

- 2.2 The first step in the job planning process is likely to be that individuals will be invited to participate in team based service planning. This can take place at any point throughout the year and will inform the individual’s job planning process. Your Clinical Director or deputy should now make arrangements for this to take place in advance of individual job plan reviews.

You will find Scottish Government Guidance on Consultant team job planning available on the HR Portal 'Career Grade Job Planning'. The principles contained within the guidance are also relevant to SAS team job planning.

- 2.3 It is further recognised that an interim job plan review can be requested by a Consultant/SAS Doctor or management at any given time if circumstances require it (eg a change in working practices or change in personal/domestic circumstances). It is the individual's responsibility, as well as that of their line manager, to ensure that the process is completed timeously and if necessary escalate any issues to the Chief of Medical Services/Associate Medical Director.

All job plans including annual and interim job plans should be completed on Allocate eJob Plan.

- 2.4 To help supplement job plan discussions, you will find NHSL's Corporate objectives at <https://www.nhslanarkshire.scot.nhs.uk/download/corporate-objectives/> There should be a clear alignment to the corporate objectives in each job plan.
- 2.5 In view of the workload that Job Plan Reviews impose on Medical Managers and in particular Clinical Directors, job plan reviews can be delegated to Deputy Clinical Directors/Clinical Leads to assist with the process. The sign off process for all job plans is in line with the Scheme of Delegation.

Where requested, the Clinical Lead or Deputy Clinical Director is the first sign off, Deputy Clinical Director or Clinical Director is the second sign off and the Associate Medical Director of Chief of Medical Services is the third and final sign off.

If the Clinical Director is the first stage sign off, then the job plan will only require to have a 2 stage sign off with the Associate Medical Director of Chief of Medical Services as the final sign off.

Consultants/SAS Doctors should approach the appropriate manager and make arrangements to meet with them at a mutually acceptable time to undertake the job plan review.

Clinical Directors should make arrangements with the Chief of Medical Services/Associate Medical Director to undertake their job plan review.

- 2.6 Job Plans should be completed electronically on the Allocate e-Job Planning System. Guidance for this process is attached at Appendix B.

It is the responsibility of all Consultants and SAS Doctors to participate in the Job Plan Review process and they share responsibility with their reviewer or Clinical Director to ensure that this is undertaken and approved timeously. Paragraph 6.1 has information on how to proceed if there is failure to agree a forthcoming job plan.

- 2.7 Please note that the agreed Job Plan documentation will be available to the Chief of Medical Services (CMS) or the Associate Medical Director (AMD) as appropriate on the e-job plan system. The Deputy CMS/AMD may deputise when appropriate.

The CMS/AMD will require to view the job plan on the e-job plan system. They will also require a copy of Form 4 for Appraisal to be uploaded as a document on the system as they will not be able to recommend pay progression without both documents. If Consultants/SAS Doctors have undertaken appraisal on SOAR, a copy of Form 4 should be downloaded and attached to the Allocate e-Job Plan system.

- 2.8 Job plan review documentation should be completed on the system and signed off by the Clinical Director prior to 31 March. Thus, allowing the Pay Department to process incremental credit timeously for a April/May uplift.

Unless written confirmation of an agreed exemption has been received, all Job Plan Review documentation MUST be available to the AMD/CMS for recommendation by the deadline of 31 March.

Job plans that are approved after 31 March but before the absolute deadline of 30 April will be processed but may result in late implementation of any changes in pay.

Failure to complete the job plan review documentation by 30 April may result in no new EPA/APA contracts being issued for the year ahead (if applicable) and a recommendation may go forward that no pay progression is awarded. Please see Section 3 for exceptions under mitigating circumstances.

- 2.9 The appraisal process is separate from job planning but the job plan review(er) will agree specialty specific objectives with Consultants/SAS Doctors in respect of the coming year. Consultants/SAS Doctors should confirm any other known interests that have funding associated with them (including sponsored attendance at meetings); this is in order to comply with NHS Lanarkshire's policy on Standards of Business Conduct and is a regular feature of annual job plan reviews.

- 2.10 Where there is a failure to agree in the job planning process, but there is active participation in mediation or appeals ongoing, the dates and provisions of paragraph 2.8 will not apply and both the existing job planning and pay arrangements will remain in place until such time as agreement is reached, whereupon the provisions of the new job plan will be applied and pay changes (if appropriate) backdated to the date of the original job plan review request.

Pay progression will be actioned even if the mediation/appeals process has been invoked and providing annual appraisal has been undertaken within the relevant timescale.

- 2.11 It is recognised that Consultants in Public Health Medicine will not be able to follow the same approval process as Consultants within other specialties. Job Plan reviews will be undertaken by the Director of Public Health who will also

decide whether pay progression criteria has been met or not. Appeals will be held in line with Section 7 of this Guidance.

- 2.12 To summarise, with the exception of Consultants in Public Health Medicine, all annual job plan review documentation must be with the Chief of Medical Services /Associate Medical Director who will recommend to the Divisional Medical Director if pay progression criteria has been met or not. These recommendations and documentation should simultaneously be shared with the Medical and Dental Staffing Department.
- 2.13 Where individuals have not been recommended for pay progression, the individual should be advised immediately. The job plan review should also be shared with the Divisional Medical Director/Medical Director (North/South Health and Social Care Partnership) who will make the decision taking into consideration all criteria (see paragraph 3 below) on whether pay progression should be awarded. If pay progression has not been awarded, the Doctor should be advised that an appeal can be lodged as per Section 7 of this Guidance.

### **3. MITIGATING CIRCUMSTANCES**

- 3.1 If a Consultant/SAS Doctor has failed to satisfy the criteria for pay progression in any given year, it is possible that there may be mitigating circumstances pertaining to that individual which may still allow pay progression to be confirmed. Each case will be considered on its merits. Where either party believes that the criteria for pay progression may not be met, these need to be highlighted in advance of the Job Plan Review to allow for an interim Job Plan Review to be undertaken (in line with the relevant TCS).
- 3.2 If a Consultant/SAS Doctor encounters any difficulties in completing the electronic Job Plan documentation then contact should be made directly at the earliest possible opportunity with the Head of Human Resources (Medical, Dental and Employment Services).

### **4. PAY PROGRESSION**

- 4.1 Pay progression is relevant to Consultants and SAS grade Doctors.
- 4.2 Paragraph 5.2.3 of the New Consultant Terms and Conditions states that “The employer may decide to delay pay progression through seniority points in any year only where it can be demonstrated that, in the year, the Consultant has not:
- a) met the time and service commitments in his/her job plan (T&Cs **Section 3, paragraphs 3.2.2 to 3.2.6**); and/or
  - b) met the personal objectives in his/her job plan or – where this is not achieved for reasons beyond the individual consultant’s control – having made every reasonable effort to do so (T&Cs **paragraph 3.2.16 to 3.2.21**); and/or
  - c) Participated satisfactorily in annual appraisal, job planning and objective setting; Participation in annual appraisal is defined as “having

completed appraisal or, where mitigating circumstances apply, have an exemption certificate". Participation in job plan review is defined as "having completed the employee's section on the electronic job plan review system and requested a meeting with the appropriate Reviewer" and/or

- d) worked towards any changes agreed as being necessary to support achievement of the organisation's service objectives in the last job plan review; and/or
- e) allowed the NHS (in preference to any other organisation) to utilise the first portion of any additional capacity they have (T&Cs **paragraph 4.4.6 to 4.4.12**); and/or
- f) met required standards of conduct governing the relationship between private practice and NHS commitments (T&Cs **Section 6**).

The Terms and Conditions also state (Paragraph 5.2.4) that "Progression through seniority points will not be deferred in circumstances where the inability to meet the requirements set out in Paragraph 5.2.3 (T&Cs) is occasioned by factors outwith the control of the Consultant". The Terms and Conditions are clear as Paragraph 5.2.5 indicates that progression through seniority points must not be related to or affected by the outcome of the Appraisal process. A recommendation to withhold pay progression entitles a Consultant to invoke the Mediation and Appeal process at stage 2 mediation. It is therefore necessary that NHSL has robust and demonstrable criteria for withholding pay progression.

4.3 Schedule 11 of the 2022 SAS Contract state that for pay progression to be applied, the Doctor must have participated satisfactorily in the job planning process on a yearly basis:

- a) made every reasonable effort to meet the time and service commitments in their Job Plan and participated in the annual Job Plan review;
- b) met the personal objectives in the Job Plan, or where this is not achieved for reasons beyond the doctor's control, made every reasonable effort to do so;
- c) worked towards any changes identified in the last Job Plan review as being necessary to support achievement of joint objectives; and
  - participated satisfactorily in the medical appraisal process on a yearly basis in accordance with the GMC's requirements set out in 'Good Medical Practice' where the outcomes are in line with organisational standards and objectives;
  - Demonstrated yearly completion of the employer's mandatory training.

4.4 Schedule 15 of the 2008 SAS Contract also stipulates the requirements for pay progression for those Doctors remaining on the Terms and Conditions.

## **5. CRITERIA FOR WITHHOLDING PAY PROGRESSION**

### **5.1 Time & Service Commitments**

It should be possible to determine whether a Consultant/SAS Doctor has undertaken those activities which have a specific location and time with a high degree of accuracy within the core and EPA contracts. As these are the activities which generally have the greatest impact on waiting lists and waiting times, it is intended that any shortfall in the total number of expected activities delivered – for which there is not a wholly satisfactory explanation acceptable to management – would be adequate grounds for withholding pay progression. Activities not undertaken at specific locations or times are usually less easily quantified and pay progression would only be withheld on these issues where specific concerns had been identified and the individual Consultant, having been made aware of these concerns, had failed to address them satisfactorily.

Time spent on supporting professional activities may be more difficult to assess. The NHSL Non DCC guidance specifically requires Consultants/SAS Doctors to collect evidence for the use of their SPA time and indicated that such evidence would normally be visible outputs eg: completed audit projects, minutes of meetings, attendance certificates, attendance registers, educational programmes etc which either demonstrate that something specific has been achieved or which confirmed the presence of the Consultant/SAS Doctor at the activity.

Consultants/SAS Doctors have an allocation of PAs in their job-plan each week for SPAs. The assumption in NHS Lanarkshire is that the average full-time Doctor will have one programmed activity to cover SPA activities necessary for appraisal and revalidation. This is often referred to as 'core SPA'.

Additional PA's for other SPA activity will only be allocated for those activities which fulfil the details set out within the 'Non-DCC Guidance'. For instance, educational supervision, appraisal roles, etc.

It will normally be the case that failure to provide sufficient evidence would warrant either a) withholding pay progression in line with 4.2 and 4.3 a) above or b) a proportionate reduction in the number of paid programmed activities in the Consultant/SAS Doctor's job plan for the following year or, if necessary and justifiable, c) an increase in the number of DCC activities in the job plan for the following year. The selection of an option from these would be discussed by the Reviewer and the Consultant/SAS Doctor at the job-plan review meeting, and appropriate recommendation made to the CMS/AMD.

### **5.2 Objectives**

Consultants and SAS Doctors have NHSL medical and dental generic and specialty-specific objectives. The number and scope of objectives varies somewhat from Doctor to Doctor. However, objectives should be appropriate, identified, agreed and may include numerical outcomes and outputs. NHS

Lanarkshire's objectives for the service should be considered as part of the job plan review.

The significance of failing to meet individual objectives also varies. Apparent failure to meet a proportion of objectives might demonstrate a pattern of behaviour which would justify withholding pay progression.

### 5.3 **Appraisal/Job Planning/Objective Setting**

This is an absolute criterion and failure to have satisfactorily participated in Annual Appraisal within the preceding 12 months would (subject to mitigating circumstances) automatically result in pay progression being withheld. Similarly, failure to attend a Job Plan Review meeting or participate in Objective setting (subject to mitigating circumstances) would both justify withholding pay progression.

Any Consultant who fails to undertake a Job Plan review and Appraisal relevant to these periods of time and without substantial reason will not be recommended for pay progression on their incremental date or be eligible to apply for the Award of Discretionary Points (if applicable) for the relevant year.

### 5.4 **Standards of Conduct**

Failure to comply with NHS Lanarkshire's Standard of Conduct and Private Practice (Para's 6.1.1 & 6.1.2 of the Terms and Conditions of Service) may result in pay progression being withheld.

## 6. **MEDIATION & APPEAL PROCESS WHERE THERE IS FAILURE TO AGREE FORTHCOMING JOB PLAN**

6.1 Where there is failure to agree a forthcoming Job Plan for a Consultant or a SAS Doctor, the following process will be applied in line with TCS section 3.4 (consultants), TCS Schedule 5 for SAS Doctors on the 2008 or 2022 contract.

6.1.1 The disagreement is referred to the Chief of Medical Services / Associate Medical Director (as appropriate for Mediation).

6.1.2 If there is still a failure to agree a forthcoming Job Plan then the disagreement should be referred to the appropriate Divisional Medical Director for consideration.

6.1.3 Where there remains a failure to agree, a formal appeal can be invoked. Details of panel membership can be obtained from Human Resources or LNC Officers.

## 7. **APPEALS PROCESS FOR PAY PROGRESSION**

7.1 Where the decision is taken not to award pay progression, a Consultant or SAS Doctor will have the right to invoke Stage 2 of the Mediation and Appeals Process as described in paragraphs 3.4.1 and 5.2.8 of the Terms and Conditions of Service for Consultants or Schedule 5 para 6 for SAS Doctors.



- 7.2 Following receipt of the decision not to award pay progression, where exceptionally a Consultant remains dissatisfied with the decision, he/she may refer the point of disagreement to the Chief Executive. A SAS Doctor can refer the matter to the Divisional Medical Director (Acute or HSCP). This referral should be made, in writing, within two weeks of receipt of the decision.

The Chief Executive may convene or delegate authority to instruct a panel to be convened by the Medical Director, who will meet with the Consultant, their Trade Union or other representative, should they choose to have one, and the Divisional Medical Director who has made the decision not to allow pay progression. The meeting will consider the point of disagreement and to hear the parties' consideration of the issues. The panel may or may not include HR representation.

All parties will use their best endeavours to ensure that agreement is reached at this stage. The Medical Director, panel Chair will, normally within two weeks of meeting, advise the Consultant/SAS Doctor and Divisional Medical Director in writing of his/her decision concerning the point of disagreement, giving reasons to explain their decision.

- 7.3 When an individual does not receive pay progression, it should be noted that completion of the following year's paperwork will not retrospectively count for pay progression for the previous financial year.
- 7.4 Further information on the Process or Terms and Conditions of Service are available from the HR Medical and Dental Staffing Department via HR Service Now or from BMA Local Negotiating Committee representatives (contact via [LNC-NHSLAN@bma.org.uk](mailto:LNC-NHSLAN@bma.org.uk) ).

## **8. CONFIDENTIALITY AND USE OF INFORMATION**

- 8.1 For the purpose of providing up-to-date information on engagement with the appraisal process details are recorded electronically in the NHS Lanarkshire's Appraisal/Revalidation database.
- 8.2 Details of job plans will be held in the Allocate electronic job planning system.
- 8.3 A Privacy Impact Assessment Questionnaire (PIAQ) was completed for both systems. NHS Lanarkshire hold the assessment for the Appraisal/Revalidation system, whereas the assessment for the Allocate eJob Plan system is held on a national basis.
- 8.4 On some occasions, information will be anonymised and shared with NHS Education for Scotland and collaborating Universities, for research and planning purposes.
- 8.5 If you wish to apply for access to your data, or if you would like more information about your rights under the Act you should, in the first instance, contact the Head of Medical Staffing in the Human Resources Department.