BMA

COVID-19 - SAS doctors FAQs

My employer has said they're cancelling my Supporting Professional Activities (SPA) time. Are they allowed to do this?

In these extreme circumstances, this change could be considered a necessary measure. However, this is an important clinical decision and should be discussed and agreed between a SAS doctor and their employer before a change is made, even in the short term.

While we understand that some employers may, in the current circumstances, seek to prioritise Direct Clinical Care (DCC) activity, this shift in focus will necessarily come at the expense of critical work that is classed as SPA. As outlined by the government, it will be expected that many doctors will be working in areas that they are less familiar with and this requires time for additional training and support.

If you nd yourself in the position of being asked to reduce your SPA activity, your employer should work with you to determine the practical steps necessary to ensure that this is done safely and proportionately, so that these changes do not have a detrimental e ect on your ability to plan and deliver a safe, e ective service during this unprecedented time.

You should also expect your employer to set out clearly how this time will be recompensed, whether by making the time up at a future date (and ideally as soon as possible) or through an agreed level of remuneration. Perpetually deferring SPA time may simply store up more problems in the future both for you and your employer.

There are serious implications to shifting a doctor's focus solely to DCC and a change such as this should only be made where it is absolutely essential. Insisting that senior clinicians remain on the front line with no respite is likely to exacerbate the risks of exhaustion and burnout that, in such a crisis, will already be high. Responding to this crisis will likely be a marathon, not a sprint and the service will need to preserve the capacity of its senior sta if it is to navigate it successfully.

How do I need to adapt?

In such unprecedented circumstances, doctors are likely to be asked to work in ways for which they will not have trained. Some may well be asked to work very far outside of the clinical areas they have spent many years training

to deliver care in.

This will mean:

- you require additional time to undertake entirely new training

 you will need to refresh and update in areas of practice that they will not have worked in for a number of years

 there will be a need for supervision by other senior colleagues to ensure that you are delivering your new or modi ed roles as well as possible

 if you're working outside of your specialty area, you will need feedback and review of your clinical work in order to ensure that it continues to be well delivered

 you will need to carefully review and re ect on the work you have undertaken in order to ensure you address areas of di culty

- for others, time will be required to train your colleagues in these new or updated ways of working.

Senior clinicians are extremely skilled and experienced in their customary roles. However, we would not expect any doctor currently being trained to have to work in new areas entirely independently and without oversight. You should never be expected to work outside areas of your competency without appropriate training and supervision.

My employer says my working pattern will need to change signi cantly- what are my rights?

In the current situation it is not unexpected that employers will wish to amend rotas and make changes to doctors' hours of work. Hours of work should always be organised with your safety in mind.

However, you should be fully consulted on such changes and discussions must take place with those who have particular difficulties with proposals.

We would suggest initially that you discuss any concerns with your clinical manager and/or HR or Medical Staffing to enable an informal resolution.

 Any proposed changes to hours of work should include appropriate remuneration, rest time and adequate breaks.

 Any revised work patterns must be accommodated within your contracted hours, including with respect to plain and premium time (where applicable).

 Any additional work that goes beyond your contracted hours is optional and if agreed, it should be paid at an agreed rate.

If matters cannot be resolved informally, then members should contact the BMA for further advice.

When considering the trust's proposals doctors should also be mindful of the GMC good medical practice statement:

"You must offer help if emergencies arise in clinical settings or in the community, taking account of your own safety, your competence and the availability of other options for care."

What are my obligations if I am asked to provide cover for a colleague who is absent?

There need to be clear and understood limits to the level of cover that any individual can be expected to provide.

Specialty Doctors and Associate Specialists are 'expected to be exible and to cooperate with reasonable requests to cover for their colleagues' absences where they are safe and competent and where it is practicable to do so' (Schedule 3, paragraph 3 of the Terms & Conditions of Service for both contracts).

There is no strict de nition of 'practicable' but in general terms it means something close to 'able to be done' or 'able to be put into practice'.

Whether something is practicable or not in a given situation will depend on the circumstances, including your personal circumstances.

An example

If, for example, you have caring responsibilities towards family members, you may be justied in saying that it is not practicable for you to provide unforeseen, short-notice cover that conicts with these responsibilities.

Alternatively, if providing the cover requested would compromise patient care or safety because it's above your competency, then it would not be practicable to provide the cover.

Coming to an agreement with your employer

Unless there are local or national arrangements already in place, you are encouraged to come to agreement locally with your employer on:

- what is deemed to be practicable
- what the proposed cover entails
- that the work is of a suitable nature to be covered by you

- that the right clinical need has been prioritised in a situation where clinical personnel is limited in number.

In establishing suitability, due regard must be given to your duty to recognise and work within the limits of your professional competence, as well as your assessment of the likely impact on your wellbeing.

It may be necessary to agree to re-arrange other duties (e.g. cancelling a clinic) for you in the short term in order to provide adequate cover for the prioritised work.

What if I am asked to 'act down' or 'act up'?

You should only act within your existing competencies. If you are working at di erent levels, you should be paid appropriately.

Covering for a junior colleague

If you are covering the work of a junior colleague, you do not have the option of pretending that you are working at a lesser level of responsibility than you do normally.

Accordingly, you are not 'acting down' – you are acting appropriately in response to the unusual circumstances. As a result, you should continue to be remunerated in line with your usual rates of pay for that particular type of work.

'Acting down' should only ever be a short-term measure and is not a long-term solution. You should check for local agreements on acting down and ensure that pay or time o in lieu arrangements are in place. This should not be necessary for a period of longer than 72 hours, after which the employer should be in a position to employ a locum if needed.

You should notify your Local Negotiating Committee (LNC) of every occasion of acting down so they can monitor the e ectiveness of the local policy.

Acting up

Acting up can be a positive opportunity for professional career development. However, while acting up, you should still expect to be appropriately remunerated in line with the level of work you are delivering. Many of you will already be working at a senior level, so it is important that you are paid in accordance with the work you are undertaking.

This will either be through the payment of an acting up allowance (as for associate specialists) or through a speci c agreement to ensure appropriate levels of pay.

Is indemnity covered?

NHS England, NHS Resolution, NHS Improvement and the Department of Health and Social Care have con rmed that any person working for trusts or GP practices will be covered for NHS work by existing indemnity arrangements, including those returning from retirement.

Furthermore, under the Coronavirus Act 2020, additional indemnity is provided for clinical negligence liabilities arising from NHS activities carried out for the purposes of dealing with, or in consequence of, the coronavirus outbreak. This includes where professionals are working as part of the coronavirus response, or undertaking NHS work to back II others, and where existing arrangements do not cover a particular activity.

If you are concerned about what might be expected of you, or want to get any advice or support on these issues, get in touch with us by emailing support@bma.org.uk.

Read the BMA guidance for SAS doctors acting up