Management Executive

To: Chief Executives of NHS Trusts
Chief Executives of Directly Managed Units
Regional Postgraduate Medical and Dental Deans
Finance Directors of NHS Trusts
Finance Directors of Directly Managed Units
General Managers of the SHAs for
the London Postgraduate Teaching Hospitals
Deans of Medical and Dental Schools
Regional Advisors in General Practice

Department of Health

Quarry House Quarry Hill Leeds LS2 7UE Telephone 0532 545000 ext GTN 513 Fax 0532

Copy: Regional General Managers

Regional Directors of Finance

Regional Directors of Public Health

Regional Consultants in Public Health Medicine (Medical Staffing)

Trust Outposts

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Dear Colleague,

*(EL(94)1 4 January 1994* 

Introduction of compulsory induction courses and changing the starting day for hospital medical and dental staff

- 1. There has been an increasing recognition of the importance of induction courses for newly qualified Hospital Medical and Dental Staff and for those joining another hospital or moving to another specialty. This letter urges that such courses are set up as a matter of routine and in order to facilitate this, sets a new starting date for newly qualified Pre-Registration House Officers (PRHOs) and for Senior House Officers (SHOs) taking up their first appointments.
- 2. Doctors taking up their first pre-registration posts will be **required to attend an induction course** in their new hospital, on the first Tuesday in August (ie their start date for employment purposes). Similar arrangements have been agreed for newly qualified PRHOs (mainly Cambridge graduates) who start employment in the February. These new arrangements should not prejudice any existing successful induction courses which are currently in place and have been approved by the Regional Postgraduate Dean. Appropriate induction courses should be offered to all those entering each of the training grades for the first time.
- 3. The NHSME, in consultation with NHS Managers and the profession, has therefore agreed to change the starting **day** for newly qualified PRHOs to the first Tuesday in August and for SHOs on first appointment to the first Wednesday in August.
- 4. Pre-registration employment will continue to be not less than the period of 12 months envisaged in 1951 GMC Regulations. These new arrangements will begin in August 1994, when the starting day for new PRHOs, will be Tuesday 2nd August. PRHOs already in post, who would previously have moved on 1st August will continue in their present positions up to and including 2nd August, they will therefore take up their new posts on Wednesday 3rd August 1994. This overlap will ensure that the PRHOs completing their service will still be in post when the new PRHOs are attending induction courses, thus ensuring the provision of suitable cover arrangements. The arrangements for those newly qualified PRHOs who commence in the February will be effective from 1995.

5. Details of the new arrangements including the revised start dates for PRHOs (covering the next ten years) are outlined in Annex A.

## Action required

6. Educationally approved induction programmes for new PRHOs should be prepared in consultation with Regional Postgraduate Deans and the local consultants and managers in each provider unit. Trusts and Directly Managed Units should prepare contracts with the new starting date(s).

#### Contact for further information

7. The NHSME contact is Mr M. R. Varley, Health Care Directorate, Medical Education Training and Staffing Division, Room 2W38, Quarry House, Quarry Hill, Leeds LS2 7UE Telephone No: 0532 545862.

Yours sincerely,

Dr Graham Winyard,

Director, Health Care Directorate,

NHS Management Executive

This letter, but not the attached guidance, will be cancelled on 30 December 1994.

# Introduction of compulsory induction courses and changing the starting day for hospital medical and dental training posts

# Outline of the new arrangements

## Introduction

- 1. Those hospitals receiving newly qualified house officers are required to offer an induction programme, involving both the local consultants and representatives of the hospital management. Appropriate arrangements should be made for newly qualified doctors commencing their first posts in February.
- 2. Where more experienced doctors are joining a new hospital, an induction programme should also be arranged as appropriate to their seniority. This may be undertaken during lunch-time/early evening periods if an allocation during the working day cannot otherwise be arranged.
- 3. Induction programmes for PRHOs, approved by the Regional Postgraduate Dean, should cover not only management issues, but also professional concerns, for example, death certification, breaking bad news, keeping GPs informed of their patients' progress etc. Many hospitals already offer such programmes, and some have been described in the literature (BMJ 1992: 304: 1619-20). The recent SCOPME report "Induction Programmes for Hospital Medical and Dental Staff in Training" is recommended. It is vital that local consultants, as well as the Regional Postgraduate Dean, are involved in the planning of these programmes, and that consultants participate in them. General Practice tutors/course organiser may also be invited to contribute.
- 4. Induction courses for more senior doctors are just as important, but may need to cover different topics. As this group of doctors is not likely to be available for a day-long course on the day prior to commencing their new post, hospitals are expected to arrange appropriate lunch-time or early evening meeting(s) to deal with local policy and arrangements. Again, consultants as well as administrators, and where appropriate general practice trainers/course organisers, are expected to participate.
- 5. Specific arrangements should be made for a comprehensive handover for new post-holders at all grades. Consultants should expect to have more contact with their new staff while they become familiar with patients already under the care of the team. Time should be allowed for the completion of any necessary administrative or residential details.
- 6. There has been considerable concern for some time over the starting dates for newly qualified doctors, particularly when these occur at a weekend. The quality of patient care may be reduced where relatively inexperienced doctors such as newly appointed PRHOs or SHOs find themselves responsible for a new group of patients, as well as emergency admissions, in an unfamiliar hospital, with fewer colleagues immediately available. The revised starting day should avoid these problems and also ensure that patients admitted as emergencies over the previous weekend have an investigation and treatment plan established before the changeover.
- 7. These new arrangements should not prejudice any existing successful induction courses which are currently in place, however they must be approved by the Regional Postgraduate Dean.

## Main features of the new arrangements

- 8. From August 1994, newly qualified PRHO appointments will commence on the first Tuesday of August (this day will be set aside for induction programmes and handover) and PRHOs completing their service will continue in post up to and including the first Tuesday in August; similar arrangements should be set in place for those newly appointed PRHOs who commence in the February effective from 1995.
- 9. Where a trainee is moving immediately to a new post located at some distance from their current post, every effort should be made to ensure that the trainee is not required to work during the evening/night of the change-over period.
- 10. If trainees, in the course of their duties, will be expected to participate in out-patient or theatre sessions, consultants are expected to reduce the size of the first of these commitments to occur after a new trainee joins the team. This will allow time for the new doctor to "remain with" the consultant on this occasion, enabling the consultant to explain his/her policies, and to make an initial assessment of the trainee.
- 11. All hospitals should prepare written information to be sent to trainee doctors prior to their taking up each new appointment. This should include information about the hospital layout and facilities, as well as details specific to the new post itself, such as the individual's timetable and the expectations of the consultants for someone in that grade. It should also deal with policy issues, for example: on initiation/change of treatment, what level of responsibility is to be expected from the appointee, which member(s) of the team discusses diagnosis, treatment and prognosis with patients, who is responsible for discharge letters etc.

#### Revised start dates

12. The new arrangements which will commence in August 1994 are as follows (dates shown cover the next ten years). The dates shown in italics are the relevant start dates for newly qualified PRHOs who would previously have commenced on February 1st:

Tuesday 2 August 1994 to Tuesday 31 January 1995 Wednesday 1 February 1995 to Tuesday 1 August 1995 (Tuesday 31 January 1995).

Tuesday 1 August 1995 to Tuesday 6 February 1996 Wednesday 7 February 1996 to Tuesday 6 August 1996 (Tuesday 6 February 1996)

Tuesday 6 August 1996 to Tuesday 4 February 1997 Wednesday 5 February 1997 to Tuesday 5 August 1997 (Tuesday 4 February 1997)

Tuesday 5 August 1997 to Tuesday 3 February 1998 Wednesday 4 February 1998 to Tuesday 4 August 1998 (Tuesday 3 February 1998)

Tuesday 4 August 1998 to Tuesday 2 February 1999 Wednesday 3 February 1999 to Tuesday 3 August 1999 (Tuesday 2 February 1999)

Tuesday 3 August 1999 to Tuesday 1 February 2000 Wednesday 2 February 2000 to Tuesday 1 August 2000 (Tuesday 1 February 2000) Tuesday 1 August 2000 to Tuesday 6 February 2001 Wednesday 7 February 2001 to Tuesday 7 August 2001 (Tuesday 6 February 2001)

Tuesday 7 August 2001 to Tuesday 5 February 2002 Wednesday 6 February 2002 to Tuesday 6 August 2002 (Tuesday 5 February 2002)

Tuesday 6 August 2002 to Tuesday 4 February 2003 Wednesday 5 February 2003 to Tuesday 5 August 2003 (Tuesday 4 February 2003)

Tuesday 5 August 2003 to Tuesday 3 February 2004 Wednesday 4 February 2004 to Tuesday 3 August 2004 (Tuesday 3 February 2004)

## Financial implications

- 13. All doctors working during July 1994, but expecting to change jobs on 1st August, will be required to continue in their present posts for an additional two days. While this will have only minor funding implications for the service, it will affect the salaries of those doctors due to change grade, and those whose incremental date is 1st August. These individuals will lose two days of their increment in 1994, as incremental dates will be delayed until the commencement of their new post. NHS Pensions Agency advise that there will be no effect on retirement pensions.
- 14. The induction courses for PRHOs taking up their first appointment will be funded as a non-recurring cost of full-time training posts, ie 100% from the Regional Postgraduate Deans' budget (as outlined in paragraph 7 of Annex A to EL(92)63.