

Guidance for appointments to associate specialist and specialty doctor posts

Contents

Foreword	3	Job plans	7
Summary of recommendations	4	Specialty doctor appointments in clinical oncology and radiology	8
Entry criteria to the grade	5	References	9
The specialty doctor contract	6		
Key recommendations of the contract	6		

Foreword

On 1 April 2008, staff grade posts were replaced by the specialty doctor grade. The new grade allows specialty doctors to contribute to service delivery and patient care within a defined specialty as a member of the multidisciplinary team, while ensuring that there is access to opportunities for career development and acquisition of new competencies. It offers an understood role in the workplace and a better defined career pathway with the possibility to progress to the specialist register (via a Certificate of Eligibility for Specialist Registration [CESR]).

Over time, it is expected that the specialty doctor will develop specialty-specific and more generic professional skills. Specialty doctors should be enabled to use their full range of knowledge and skills for the benefit of patients.

The recommendations in this document should be implemented for all doctors working in specialty doctor posts and be reflected in job advertisements and person specifications.

This document replaces *Guidance for appointments to specialty doctor posts* (RCR(11)2), which has been withdrawn, and should be read in conjunction with NHS Employers' *Terms and conditions of service for specialty doctors – England (2014)* and *Employing and supporting specialty doctors: A guide to good practice (2008)*.^{1,2}

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Summary of recommendations

Specialty doctors are doctors who have completed the equivalent of at least four years of postgraduate training and who are neither in a deanery-approved training post nor hold a consultant appointment. Specialty doctors are integrated members of the medical team who work in a specialty area with specific skills for the role to which they are appointed.

Appointments should normally be made by a properly constituted appointment panel, ideally including a College representative. The Royal College of Radiologists (RCR) expects all those acting on its behalf in relation to appointments to specialty doctor posts to be familiar with the relevant employment regulations. The recommendations for specialty doctor contract should be followed.¹

A formal job description and job plan should be available. New job plans should involve the RCR Regional Advisor and should allow a minimum of one, and ideally two, programmed activities (PA) per week to ensure sufficient time for supporting professional activities to allow revalidation.

Robust and appropriate consultant supervision must be available and the work level appropriate for the skills of appointee.

Doctors should register for continuing professional development (CPD) from the date of appointment with the RCR or another appropriate College. If the majority of work is in clinical oncology or clinical radiology, we would recommend applying to become an associate member of the RCR.

Entry criteria to the grade

A doctor appointed to this grade:

- Shall have full registration and a license to practice with the General Medical Council (GMC) and
- Shall have completed at least four years' full-time postgraduate training in the UK (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. This is defined as the successful completion of the Foundation Programme, followed by either successful completion of core medical training or recognised equivalent, or core training in clinical radiology

or

- Shall have equivalent experience and competencies.¹

Employers are advised to check with the hospital's senior clinical radiologist or clinical oncologist as appropriate (usually the clinical director) to ensure that the specialty doctor's training and experience has enabled them to acquire a safe level of competence for the post. It is the employer's responsibility to determine the competences required in the post and to ensure that any doctor appointed to the post can fulfil them. The specialty doctor will have a professional obligation to perform these competences in accordance with the principles set out in the GMC's *Good medical practice*.³

The specialty doctor contract

Further information about the contract is available in *Employing and supporting specialty doctors: A guide to good practice* and *Terms and conditions of service for specialty doctors – England (2014)*.^{1,2}

Key recommendations of the contract²

- All specialty doctors should be employed in the spirit of the national contract.
- All specialty doctors have appropriate clinical supervision.
- Specialty doctors should have access to a minimum of one PA per week to support professional activity, for example, professional development, audit, teaching and research.
- Specialty doctors have fair and reasonable access to study leave with appropriate funding according to the national contract.
- All employers should apply the minimum requirement of entry to the grade.
- Employers should use the professional development framework for specialty doctors.
- Employers should use the aid for employers when writing a person specification for a specialty doctor post.
- Induction for specialty doctors should meet the requirements of the Healthcare Commission and NHS Litigation Authority (NHSLA) and include induction to the NHS, a corporate induction and departmental induction.
- All specialty doctors undergo an effective annual appraisal that:
 - Ensures the specialty doctor is trained in being an appraisee
 - Results in a personal development plan (PDP) with clear achievable objectives
 - Identifies the appropriate professional development and study leave to support the maintenance of and development of skills in a planned way, identified through the appraisal process
 - Is supported by a portfolio of evidence.
- Experienced specialty doctors should be trained as appraisers.
- All specialty doctors should be seen as an integral part of the clinical team.
- Employers should support specialty doctors in any efforts to meet the requirements of CESR applications to the GMC, particularly when this fits in with local workforce planning requirements.

Job plans

A job plan is now a contractual requirement and annual job planning and appraisal is an absolute requirement for successful revalidation. In addition, job plans assist in focusing personal development and movement through the grade. Formal mediation and appeals procedures are now in place and an interim job plan review can take place if there are significant changes to working practice.

A minimum of one, ideally two, PA per week should be included for supporting professional activities. The employer is responsible for ensuring training/development/facilities and support to standards outlined in *Improving working lives*.⁴

Specialty doctor appointments in clinical oncology and radiology

The appointment committee should comprise, as a minimum, a senior manager and a consultant from the trust, preferably in the relevant specialty, and a further external senior doctor nominated by the relevant RCR Faculty. The recommended job plan should be reviewed by the RCR regional specialty advisor before the post is advertised.

Employers should ensure that doctors are able to participate fully in CPD programmes organised by the RCR and other relevant professional organisations. It is important that specialty doctors are able to maintain and develop skills.

Associate membership of the RCR should be encouraged, to facilitate the doctor's participation in CPD. The current Regulations of the RCR state that 'the Council may admit as Associate Members, upon payment of the appropriate fee in accordance with By-Law 4, medical or dental practitioners employed in a non-training post in the specialties of or in specialties closely associated with clinical oncology or clinical radiology or dental radiology, who do not have a postgraduate qualification in clinical oncology or clinical radiology or dental radiology.'

Approved by The Royal College of Radiologists Clinical Oncology Faculty Board: 26 February 2015

Approved by The Royal College of Radiologists Clinical Radiology Faculty Board: 27 February 2015

References

1. NHS Employers. *Terms and conditions of service for specialty doctors – England (2008) (version 3 March 2014)*. London: NHS Employers, 2014.
2. NHS Employers. *Employing and supporting specialty doctors: A guide to good practice*. London: NHS Employers, 2008.
3. General Medical Council. *Good medical practice*. London: GMC, 2013.
4. Department of Health. *Improving working lives*. London: Department of Health, 2000.

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