Specialist Doctor Contract Statement

The NHS Employers contract changes that came into effect after a vote through the British Medical Association (BMA) earlier in 2021 directly affect Breast Clinicians. The majority of these doctors work on Specialty Doctor (SD) or Associate Specialist (AS) contracts. The closure of the AS contract in 2008 meant that many established Breast Clinicians, working autonomously within their units were disadvantaged by the pay terms and conditions of the SD contract. Whilst some foundation trusts continued to appoint or regraded appropriately skilled doctors to the closed AS grade, this was not a national move. The creation in 2021 of the new Specialist <u>contract</u> recognises the role of a senior non Consultant doctor, including Breast Clinicians and has terms and conditions more favourable to this group of senior doctors.

In order to be considered for a Specialist doctor post, under the new framework, the doctor must have a full Licence to Practice. They must have completed a minimum of 12 years' medical work (either continuous period or in aggregate) since obtaining a primary medical qualification, of which a minimum of six years should have been in a relevant specialty in the Specialty Doctor and/or closed SAS grades. Equivalent years' experience in a relevant specialty from other medical grades including from overseas may also be accepted, but are subject to local agreement.

Additionally they should meet the person specification and generic capabilities framework outlined by NHS Employers. Within each of the 6 subheadings of this framework, the responsibilities of a Specialist grade doctor are laid out, and are achievable by established Breast Clinicians who have completed all elements of training, be that through locally or nationally validated training or through the new Breast Clinician Credential Programme which commenced in 2019. Demonstration of all Generic Capabilities should not be a mandated portfolio collecting exercise, moreover a fluid discussion and recognition of workplace activity between the doctor and their clinical team leaders / managers / appraiser. Guidance notes set out in this template are useful. Graduates of the Breast Clinicians Credential training scheme, would require a minimum of three years post Credential experience to achieve the Specialty specific entry requirement. Additional years of practice prior to Credential training would qualify towards the minimum 12 years post qualification medical experience required to meet entry requirements for the Specialist doctor grade. Established Breast Clinicians, employed on SD contracts for 6 years or more, or those with 6 years combined Breast Clinician work and specifically relevant (i.e. radiology) experience, within their 12 years of post-graduate work should be immediately considered eligible for Specialist doctor status. Those doctors working less than full time either through the new Credential scheme or prior training routes, may reach the necessary entry requirements sooner than whole time equivalent years served.







It has been recognised by the BMA that employers may be reluctant to alter contracts of established SDs to the new Specialist grade, because they work at a lower cost. The Association of Breast Clinicians, with the backing of the Royal College of Radiologists and National Breast Imaging Academy advocates appropriate pay terms and conditions for all its members and encourages employers and members to instigate contractual changes to reflect this. Additional managerial, leadership and formal training roles are beyond the scope of the Specialty Doctor, and Breast Clinicians involved in these (and other additional professional duties associated with senior clinician status) should be moved to a Specialist contract if all other criteria are met. The specific crisis facing the breast imaging workforce currently is being addressed partly by an increasing number of Breast Clinicians at a local level, is highly advantageous for screening and symptomatic breast services.

Breast Clinicians provide high quality imaging and clinical service provision across the four nations. Recognition of this through the new Specialist contract underpins development and growth of the profession, tackling a deficit in the workforce and promoting excellence in clinical care.

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