



Department
of Health

From the Rt Hon Jeremy Hunt MP
Secretary of State for Health

*Richmond House
79 Whitehall
London
SW1A 2NS*

Mb-sofs@dh.gsi.gov.uk

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Dr. Johann Malawana
Chair of Junior Doctors' Committee
British Medical Association
BMA House
Tavistock Square
London WC1H 9JP

Dear Dr Malawana,

Thank you for coming to see me to discuss the junior doctors' contract. You stressed that the key issue for junior doctors is a contract which promotes both patient safety and fairness for juniors.

I share exactly the same aims for the new contract as you do. As you know, I have put improving safety and quality at the heart of my time as Health Secretary and I agree with you that junior doctors play a vital role in the NHS and deserve to be treated with fairness and equity. They are tomorrow's leaders and I want to support them to have long, productive NHS careers.

Given we both fundamentally share the same objectives, I agreed to write to you with assurances for junior doctors about our approach to a new contract.

Firstly, this is not a cost cutting exercise. I can give you a categorical assurance that I am not seeking to save any money from the junior doctors' paybill. Whilst I want to see an end to automatic annual increments (with pay rises instead based on moving through the stages of training and taking on more responsibility), these changes would be cost neutral, rather than cost saving.



This will mean that junior doctors would still benefit from four or five progression pay rises as they move through training.

Secondly, I want the new contract to improve patient safety by better supporting a seven day NHS. The Government was elected on a manifesto commitment to ensure that the quality of NHS care is the same across the week. So together with NHS staff, we must eradicate the ‘weekend effect’ of excess deaths in NHS hospitals. For junior doctors, this means some increase in plain time working (backed up with an increase in basic pay) and a replacement of the banding system, and a move to paying for hours worked, with additional pay for unsocial hours. Within this, I can give an assurance that nights and Sundays will continue to attract unsocial hours payments. I would be pleased to discuss in negotiations how far plain time working extends on Saturdays.

Thirdly, I believe that our ambition for the NHS to be the safest health care system in the world is underpinned by reducing, not increasing, the number of hours junior doctors work each week. Junior doctors already work seven days and are the backbone of medical care in hospitals at weekends and at night. I can give an absolute guarantee to junior doctors that this contract will not impose longer hours. No junior doctor working full time will be expected to work on average more than 48 hours a week. I want to see a work review system with teeth that ensures that juniors are not exploited and that addresses issues of overworking if they arise.

I recognise that there will be exceptional circumstances in which an individual doctor should be compensated for hours worked outside the work schedule. In such circumstances, employers will compensate the individual doctor for such hours, provided that the work has been undertaken for the needs of the service



and is authorised by an appropriate person. Further, the employer will also have a duty to review the work schedule to ensure that such instances remain as exceptional circumstances.

My ambition on safety is also underpinned by better training for junior doctors. I am working with the BMA consultant committee to make sure there is proper consultant cover at weekends so junior doctors are better supported. I also want HEE and the Royal Colleges to continue working with the BMA and NHS Employers to look at how the training experience can be improved more generally for juniors. This is not primarily a contractual issue but we do need to look at how we can better support work life balance including leave arrangements and recognising that juniors often have family responsibilities and choose to work part time. I would like your help to formulate that programme of work.

Finally, I have asked NHS Employers to develop the details of the new contract to ensure that the great majority of junior doctors are at least as well paid as they would be now. In addition, although the current proposal does not provide protection for those whose pay reduces when they change jobs, under an agreed move to a new contract we would be willing to consider such protection for individual doctors who would otherwise lose out. In any scenario, I can give an absolute guarantee that average pay for juniors will not reduce. I have already given my assurances that GP trainees will not be disadvantaged compared with the current system. I can also say that it is our intention that flexible pay premia would be used to support recruitment into shortage specialties such as Accident and Emergency Medicine and General Practice. We would also include pay protection for doctors who change to shortage specialities and to support agreed academic work.



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I hope this letter makes clear what was discussed at the meeting – that we want to work with you, in good faith, to develop a new contract which is better for both patients and junior doctors. I am saddened by the distress being caused to junior doctors who were misled by the calculator on the BMA website into believing that their pay will be cut by 30% and that they will be asked to work many more hours each week. As you know, the Government has been saying privately to the BMA for many months that we have no such intention, so I hope that this letter, with a set of unequivocal assurances, now helps us to move the debate on and provides reassurance to junior doctors who have been on the receiving end of significant misinformation.

The negotiations on the new contract began on the basis of a shared view between the BMA and employers that the current contract had served its purpose and needed reform. The best deal for junior doctors will be achieved by the BMA coming to the table to negotiate on their behalf and I urge you now to do this.

JEREMY HUNT