

14. Doctors

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Changes made to this section as a result of Modernising Medical Careers (MMC)

Modernising Medical Careers (MMC) (NHS, 2007) is a major reform of postgraduate medical training, devised to improve the quality of patient care through better education and training for doctors. MMC aims to stop the current practice of doctors staying in the Senior House Officer (SHO) grade while waiting for a specialist training opportunity which would provide them with the training and skills to consultant level. It is a focussed training programme which will produce consultants in an average of seven years and GPs in five after graduation from medical school. This provides a summary of the changes that have taken place as a result of this reform and consequently the changes made to this section of the report.

The old scheme

The old scheme saw people leaving medical school to work as a Pre-Registration House Officer (PRHO) for one year and then as a Senior House Officer (SHO) for a minimum of two years. They then progressed to work as either a Specialist Registrar for between four to six years and then if they wished moved onto the consultant grade or they completed one year as a GP registrar and then practiced as a General Practitioner.

The new scheme

Under the new arrangements (which have been agreed by the Junior Doctors Committee (JDC), the Department of Health, COPMed and NHS Employers), all doctors in training can apply for flexible training (British Medical Association, 2005). In the past, lack of funding has been a key reason for lack of availability of flexible training for junior doctors. A part-time doctor (doing out of hours work) was paid a full-time salary and a supplement of 5% or 25% addition and employers were therefore unwilling to take on flexible trainees. Flexible trainees now still receive basic pay and a supplement to recognise Out of Hours work.

Graduates will now enter a Foundation Programme of two years, where they will gain generic skills in caring for the acutely and critically ill. There will no longer be entry into the Pre Registration House Officers grade and entry into the Senior House Officer (SHO) grades and Specialist Registrar (SPR) grades is now closed. Doctors on foundation training programmes are now called Foundation House Officer 1 (page 176) and Foundation House Officer 2 (177) depending on the stage of their training. Once they have completed the Foundation Programme, doctors will then compete to enter speciality training programmes. The holder of these posts will be known as Specialty Registrars and this new schema is found on page 178. This grade combines the two old grades of Senior House Officer and Specialist Registrar in a programme of training in a particular speciality (e.g. General medicine, Ophthalmology or Psychiatry). Once in this speciality training programme, the doctor is expected to progress through to the point where they will gain their Certificate of Completion of Training (CCT-formerly known as the Certificate of Completion of Specialist Training or CCST).

The first of these speciality training programmes started in August 2007 and the Royal Colleges will be responsible for producing curricula, the Deaneries for delivering the training and the new Postgraduate Medical Education and Training Board (PMETB) is the

legal national body now responsible for assurance and awarding Completed Certificates of Training.

Doctors who do not wish to become consultants or who are unable to do so are classified under the umbrella term of 'Staff and Associate specialist group' (SASG). This group comprises associate specialists, staff grade doctors, clinical assistants, hospital practitioners, and a number of other non-standard, non-training 'trust' grades. These doctors are not required to be on the specialist register and could under the terms of the old scheme enter from the SHO grade, instead of moving to higher specialist training. A new grade of (SASG) doctor, for which the terms are still under consideration will combine the two grades of Staff grade practitioner and Associate Specialist. A new schema for this post will be included in our next report.

On-call

Within the new contract for the staff on training grades, there is a supplement to recognise the significant impact of being on-call, around-the clock, for emergencies. These are paid to reflect the hours and intensity of their work and are paid in addition to the basic salary. This varies from 1 to 8 per cent of basic salary depending on the number of nights per week and weekends affected. The banding supplements are: Band 1C — 20%, band 1B — 40%, Bands 1A and 2B — 50%, Band 2A — 80* and Band 3 — 100%. The bands reflect whether the post is compliant with the hours controls and rest periods in the new scheme, and also whether the doctor works up to 40, 48 or 56 hours per week, the type of working pattern, the frequency of extra duty and the unsocial nature of the working arrangements. The majority of doctors in the training grades receive a banding supplement — and it is reported by the Department of Health that the majority are on band 1A/2B and are therefore entitled to a supplement of 50%. In this report, therefore, we have added a supplement of 50% to the training grades in order to calculate the total salary of the professional. This New Deal does not apply to consultants or to non-consultant career grades (staff grades and associate specialists). A guide to a consultant's on-call payments is set out by the NHS Modernisation Agency (August 2004) — *A Guide to Determining On-Call Availability Supplement*.

Continuing Professional Development (CPD)

This is classified in the Unit Costs report as ongoing training. It is the process by which doctors keep up to date with developments in their own area of practice between the time when they gain a career grade post and their retirement. It may also include elements of more general professional development. The royal colleges have developed formal schemes, which require their members to gain a certain number of credit points over a set time. Credits may be awarded for activities such as attending approved courses, publishing scientific papers, presenting research at meetings, certain teaching duties and participation in audit (quality assurance) exercises. Schemes are still very new, and details vary from college to college. In the past, we have calculated ongoing training by using (provisional) budgetary information provided by the Medical Education Funding Unit of the NHS Executive relating to allocation of Medical and Dental Education Levy funds. Until further cost information is available on the new schemes, this information has been updated.

Working hours

The European Working Time Directive (EWTD) (Department of Health, 2004) cut the number of hours a junior doctor can legally work each week. Currently, juniors are restricted to working 56 hours a week under New Deal arrangements and latest figures show that approximately 97.2% of junior doctors fall within this limit. In 2009, however, the legal working time drops to 48 hours each week.

The new contract aimed to reduce the number of hours that consultants worked, including aligning with the Working Time Directive and based funding assumptions on consultants working an average 43 hours. A typical contract is based on 40 hours per week.

Consultant contract

The current consultants' clinical excellence awards scheme has been in operation since the 2004 awards round. This scheme has replaced the former separate schemes for discretionary points and distinction awards in England with a single more graduated scheme with common criteria covering both national and local elements.

References

- Department of Health (2004) *A Compendium of Solutions to Implementing the Working Time Directive for Doctors in Training from August 2004*, Department of Health, London.
- British Medical Association (2005) *Junior Doctors Committee Annual Report, May 2005*, British Medical Association, London, <http://www.bma.org.uk/ap.nsf/Content/jdannualreport2005>.

14.1 Foundation house officer 1

The Foundation Programme is a two-year, general postgraduate medical training programme which is compulsory for all newly qualified medical practitioners in the UK. The programme has replaced the traditional grades of Pre-Registration House Officer and Senior House Officer. The Foundation Programme forms the bridge between medical school and specialist/general practice training. Foundation House Officers have the opportunity to gain experience in a series of placements in a variety of specialities and healthcare settings.

Costs and unit estimation	2006/2007 value	Notes
A. Wages/salary	£33,610 per year	Based on NHS Employers paycales including a 50 per cent supplement for out of hours work. ¹ Mid-point salary without the supplement would be £22,407. Free hospital accommodation is offered in the first year. ²
B. Salary oncosts	£7,345 per year	Employers' national insurance plus 14 per cent of salary for employers' contribution to superannuation.
C. Qualifications	£19,222 per year	The equivalent annual cost of pre-registration medical education annuitised over the expected working life of the doctor. ³
D. Overheads	£2,904 per year	Comprises £2,904 for indirect overheads. ⁴ No allowance has been made for direct overheads because it is not possible to separate these from the cost of treatment.
E. Ongoing training	£2,155 per year	Ongoing training is calculated using budgetary information provided by the Medical Education Funding Unit of the NHS Executive relating to allocation of Medical and Dental Education Levy Funds. This has been updated using the HCHS Pay and Prices inflator.
F. Capital overheads	£3,084 per year	Based on the new build and land requirements of NHS facilities. ^{5,6} Adjustments have been made to reflect shared use of administration and recreational facilities, including accommodation for night-time duties. Treatment space has not been included. Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
Working time	44.4 weeks per annum 56 hours per week	Includes 25 days annual leave plus 8 statutory leave days. ⁷ Assumes 5 days sickness leave. No study/training days have been assumed. Under the European Working Time Directive (EWTD), junior non-resident doctors can legally work 72 hours per week while working in a hospital a maximum of 56 hours per week.
London multiplier	1.18 x (A to E) 1.33 x F	Allows for the higher costs associated with London. ⁸ Building Cost Information Service and Department for Communities and Local Government. ^{5,6}
Non-London multiplier	1.00 x (A to E) 0.97 x F	Allows for the lower costs associated with working outside London. ⁸ Building Cost Information Service and Department for Communities and Local Government. ^{5,6}
Unit costs available 2006/2007 (costs including qualifications given in brackets)		
£19 (£27) per 56 hour week. £15 (£21) per 72 hour week. (includes A to F).		

1 NHS Employers (2007) *Pay Circular (M&D)(W)3/2006*, NHS Employers, London.

2 National Health Service (2006) *Work Permits (UK) Internal Caseworker Guidance*, National Health Service, London.

3 Netten, A., Knight, J., Dennett, J., Cooley, R. & Slight, A. (1998) *Development of a Ready Reckoner for Staff Costs in the NHS, Vols 1 & 2*, Personal Social Services Research Unit, University of Kent, Canterbury.

4 Netten, A., Knight, J., Dennett, J., Cooley, R. & Slight, A. (1998) *Development of a Ready Reckoner for Staff Costs in the NHS, Vol 2 Methodology*, Personal Social Services, Research Unit, University of Kent, Canterbury.

5 Building Cost Information Service (2007) *Surveys of Tender Prices*, March, BCIS, Royal Institution of Chartered Surveyors, London.

6 Based on personal communication with the Department for Communities and Local Government (2007).

7 NHS Employers (2006) *Junior Doctors' Terms & Conditions of Service*, NHS Employers, London, <http://www.nhsemployers.org/pay-conditions/pay-conditions-467.cfm>.

8 Based on personal communication with the Department of Health (2007).

14.2 Foundation house officer 2

The Foundation Programme is a two-year, general postgraduate medical training programme which is compulsory for all newly qualified medical practitioners in the UK. The programme has replaced the traditional grades of Pre-registration House Officer and Senior House Officer. The Foundation Programme forms the bridge between medical school and specialist/general practice training. Foundation House Officers have the opportunity to gain experience in a series of placements in a variety of specialities and healthcare settings.

Costs and unit estimation	2006/2007 value	Notes
A. Wages/salary	£42,047	Based on NHS Employers paycales including a 50 per cent supplement for out of hours work. ¹ Mid-point salary without the supplement would be £28,031.
B. Salary oncosts	£9,606	Employers' national insurance plus 14 per cent of salary for employers' contribution to superannuation.
C. Qualifications	£20,693	The equivalent annual cost of pre-registration medical education has been annuitised over the expected working life of the doctor. ² The first year of the Foundation Programme builds upon the knowledge, skills and competences acquired in undergraduate training. During this year, a doctor is known as a Foundation House Officer 1 and trainees hold only provisional registration with the General Medical Council, full registration being granted on successful completion of the F1 year. After this year, post graduate costs are incurred calculated using information provided by the London Deanery. ³ Costs consist of an amount for the generic curriculum, the postgraduate centres infrastructure costs, study leave and the costs of course organisers, admin support, trainers workshops, vocational training and Internal courses for GP tutors. Excluded are the costs of running the library postgraduate centres. See schema 7.5 for further details on training for health professionals.
D. Overheads	£2,904	Comprises £2,904 for indirect overheads. ⁴ No allowance has been made for direct overheads because it is not possible to separate these from the cost of treatment.
E. Ongoing training	£2,155	Ongoing training is calculated using budgetary information provided by the Medical Education Funding Unit of the NHS Executive relating to allocation of Medical and Dental Education Levy Funds. This has been updated using the HCHS Pay and Prices inflator.
F. Capital overheads	£3,084	Based on the new build and land requirements of NHS facilities. ^{5,6} Adjustments have been made to reflect shared use of administration and recreational facilities, including accommodation for night-time duties. Treatment space has not been included. Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
Working time	44.4 weeks per annum 56 hours per week	Includes 25 days annual leave plus 8 statutory leave days. ⁷ Assumes 5 days sickness leave. No study/training days have been assumed. Under the European Working Time Directive (EWTD), junior non-resident doctors can legally work 72 hours per week while working in a hospital a maximum of 56 hours per week.
London multiplier	1.18 x (A to E) 1.33 x F	Allows for the higher costs associated with London. ⁸ Building Cost Information Service and Department for Communities and Local Government. ^{5,6}
Non-London multiplier	1.00 x (A to E) 0.97 x F	Allows for the lower costs associated with working outside London. ⁸ Building Cost Information Service and Department for Communities and Local Government. ^{5,6}
Unit costs available 2006/2007 (costs including qualifications given in brackets)		
£24 (£32) per 56 hour week. £18 (£25) per 72 hour week. (includes A to F).		

1 NHS Employers (2007) *Pay Circular (M&D)(W)3/2006*, NHS Employers, London.

2 Netten, A., Knight, J., Dennett, J., Cooley, R. & Slight, A. (1998) *Development of a Ready Reckoner for Staff Costs in the NHS, Vols 1 & 2*, Personal Social Services Research Unit, University of Kent, Canterbury.

3 Personal communication with the London Deanery (2006).

4 Netten, A., Knight, J., Dennett, J., Cooley, R. & Slight, A. (1998) *Development of a Ready Reckoner for Staff Costs in the NHS, Vol 2 Methodology*, Personal Social Services, Research Unit, University of Kent, Canterbury.

5 Building Cost Information Service (2007) *Surveys of Tender Prices*, March, BCIS, Royal Institution of Chartered Surveyors, London.

6 Based on personal communication with the Department for Communities and Local Government (2007).

7 NHS Employers (2006) *Junior Doctors' Terms & Conditions of Service*, NHS Employers, London, <http://www.nhsemployers.org/pay-conditions/pay-conditions-467.cfm>.

8 Based on personal communication with the Department of Health (2007).

14.3 Specialty registrar

This grade of doctor has replaced the Senior House Officer and the Specialist Registrar. Entry point is a minimum of four years' post-graduate training, two of which must be in a relevant speciality or equivalent experience.

Costs and unit estimation	2006/2007 value	Notes
A. Wages/salary	£54,774	Based on NHS Employers payscales including a supplement for out of hours work. ¹ Mid-point salary without the supplement would be £36,516.
B. Salary oncosts	£13,017	Employers' national insurance plus 14 per cent of salary for employers' contribution to superannuation.
C. Qualifications	£23,671	The equivalent annual cost of pre-registration medical education and post graduate education of (4 years further years). The investment in training has been annuitised over the expected working life of the doctor. ² Post graduate education calculated using information provided by the London Deanery. ³ This includes costs for the new two year foundation programme and the speciality run-through grade. ⁴ Costs consist of an amount for the generic curriculum, the postgraduate centres infrastructure costs, study leave and the costs of course organisers, admin support, trainers workshops, vocational training and Internal courses for GP tutors. Excluded are the costs of running the library postgraduate centres. See schema 7.5 for further details on training for health professionals.
D. Overheads	£2,904	Comprises £2,904 for indirect overheads. ⁵ No allowance has been made for direct overheads because it is not possible to separate these from the cost of treatment.
E. Ongoing training	£2,155	Ongoing training is calculated using budgetary information provided by the Medical Education Funding Unit of the NHS Executive relating to allocation of Medical and Dental Education Levy Funds. This has been updated using the HCHS Pay and Prices inflator.
F. Capital overheads	£3,084	Based on the new build and land requirements of NHS facilities. ^{6,7} Adjustments have been made to reflect shared use of administration and recreational facilities, including accommodation for night-time duties. Treatment space has not been included. Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
Working time	43.4 weeks per annum 56 hours per week	Includes 25 days annual leave and 8 statutory leave days. ⁸ Assumes 5 study/training days, and 5 days sickness leave. Under the European Working Time Directive (EWTD), junior non-resident doctors can legally work 72 hours per week while working in a hospital a maximum of 56 hours per week.
London multiplier	1.18 x (A to E) 1.33 x F	Allows for the higher costs associated with London. ⁹ Building Cost Information Service and Department for Communities and Local Government. ^{6,7}
Non-London multiplier	1.00 x (A to E) 0.97 x F	Allows for the lower costs associated with working outside London. ⁹ Building Cost Information Service and Department for Communities and Local Government. ^{6,7}
Unit costs available 2006/2007 (costs including qualifications given in brackets)		
£31 (£41) per 56 hours week. £24 (£32) per 72 hour week. (includes A to F).		

1 NHS Employers (2007) *Pay Circular (M&D)(W)4/2007*, NHS Employers, London.

2 Netten, A., Knight, J., Dennett, J., Cooley, R. & Slight, A. (1998) *Development of a Ready Reckoner for Staff Costs in the NHS, Vols 1 & 2*, Personal Social Services Research Unit, University of Kent, Canterbury.

3 Personal communication with the London Deanery.

4 NHS Employers (2006) *Modernising Medical Careers: A New Era in Medical Training*, NHS Employers, London.

5 Netten, A., Knight, J., Dennett, J., Cooley, R. & Slight, A. (1998) *Development of a Ready Reckoner for Staff Costs in the NHS, Vol 2 Methodology*, Personal Social Services, Research Unit, University of Kent, Canterbury.

6 Building Cost Information Service (2007) *Surveys of Tender Prices*, March, BCIS, Royal Institution of Chartered Surveyors, London.

7 Based on personal communication with the Department for Communities and Local Government (2007).

8 NHS Employers (2006) *Junior Doctors' Terms & Conditions of Service*, NHS Employers, London, <http://www.nhsemployers.org/pay-conditions/pay-conditions-467.cfm>.

9 Based on personal communication with the Department of Health (2007).

14.4 Consultant: medical

Costs and unit estimation	2006/2007 value	Notes
A. Wages/salary	£117,834 per year	Based on personal correspondence with the Department of Health on average consultant earnings ¹ . Average salary without these supplements is £86,153. On-call and clinical excellence payments are included. Clinical excellence awards are based on the midpoint of those awarded (£19,950). See NHS Employers pay circular for consultant pay and allowances. ²
B. Salary oncosts	£29,917 per year	Employers' national insurance plus 14 per cent of salary for employers' contribution to superannuation.
C. Qualifications	£28,454 per year	The equivalent annual cost of pre-registration medical training and post-graduate medical education. The investment in training of a medical degree, 2 years as a Foundation House Officer and 6 years as a Specialty Registrar in a hospital setting annuitised over the expected working life of the consultant. ³ See 7.5 for further details on training for health professionals. Post graduate information calculated using information provided by the London Deanery. ⁴ Costs consist of an amount for the generic curriculum, the postgraduate centres infrastructure costs, study leave and the costs of course organisers, admin support, trainers workshops, vocational training and Internal courses for GP tutors. Excluded is the cost of the running of the library postgraduate centres.
D. Overheads	£35,167 per year	Comprises £7,739 for indirect overheads and £27,428 for secretarial staff costs.
E. Ongoing training	£2,155 per year	Ongoing training is calculated using budgetary information provided by the Medical Education Funding Unit of the NHS Executive relating to allocation of Medical and Dental Education Levy Funds. This has been updated using the HCCHS Pay and Prices inflator.
F. Capital overheads	£4,610 per year	Based on the new build and land requirements of NHS facilities. ^{5,6} Includes shared use of consultation and examination areas, and designated secretarial office space. Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
Working time	41.4 weeks per annum 40 hours per week	Includes 30 days annual leave and 8 statutory leave days. Assumes 10 study/training days, and 5 days sickness leave. The new contract aimed to reduce the number of hours that consultants worked, including aligning with the Working Time Directive and based funding assumptions on consultants working an average 43 hours. A typical contract is based on 40 hours per week. ⁷ The average working week for those with an NHS component to their contract averaged 59 hours. ⁸
Ratio of direct to indirect time on: patient-related activity	1:0.33	Assuming 69 per cent of consultant time spent on patient-related activity. ⁹ Time spent teaching has been disregarded, and non-contact time has been treated as an overhead on time spent in patient contact.
London multiplier	1.18 x (A to E) 1.34 x F	Allows for the higher costs associated with London compared to the national average cost. ¹⁰ Building Cost Information Service and Department for Communities and Local Government. ^{5,6}
Non-London multiplier	1.00 x (A to E) 0.96 x F	Allows for the lower costs associated with working outside London compared to the national average cost. ¹⁰ Building Cost Information Service and Department for Communities and Local Government. ^{5,6}
Unit costs available 2006/2007 (costs including qualifications given in brackets)		
£115 (£132) per contract hour; £152 (£175) per patient-related hour (includes A to F).		

1 Personal communication with the Department of Health (2007).

2 NHS Employers (2007) *Pay Circular (M&D)(W)3/2006*, NHS Employers, London.

3 Netten, A., Knight, J., Dennett, J., Cooley, R. & Slight, A. (1998) *Development of a Ready Reckoner for Staff Costs in the NHS, Vols 1 & 2*, Personal Social Services Research Unit, University of Kent, Canterbury.

4 Personal communication with the London Deaner (2006).

5 Building Cost Information Service (2007) *Surveys of Tender Prices*, March, BCIS, Royal Institution of Chartered Surveyors, London.

6 Based on personal communication with the Department for Communities and Local Government (2007).

7 National Audit Office (2007) *Report by the Comptroller and Auditor General/HC 335 Session 2006-2007/19 April. Pay Modernisation: A New Contract for NHS Consultants in England*, National Audit Office, London.

8 British Medical Association, *Caring for the NHS, Press Information Briefing: the Consultant and GP Contracts*, British Medical Association, <http://www.bma.org.uk/ap.nsf/Content/Pressinfobriefingconsultant>.

9 Audit Commission (1996) *The Doctors' Tale Continued*, HMSO, London.

10 Based on personal correspondence with the Department of Health (2007).

14.5 Consultant: surgical

Costs and unit estimation	2006/2007 value	Notes
A. Wages/salary	£117,834 per year	Based on personal correspondence with the Department of Health on average consultant earnings. ¹ Average salary without these supplements is £86,153. On-call payments are included and clinical excellence awards are based on the midpoint of those awarded (£19,950). See NHS Employers pay circular for consultant pay and allowances. ²
B. Salary oncosts	£29,917 per year	Employers' national insurance plus 14 per cent of salary for employers' contribution to superannuation.
C. Qualifications	£28,454 per year	The equivalent annual cost of pre-registration medical training and post-graduate medical education. The investment in training of a medical degree, one year spent as a pre-registration house officer, two years as a senior house officer and four years as a specialist registrar have been annuitised over the expected working life of the consultant. ³ See 7.5 for further details on training for health professionals.
D. Overheads	£35,167 per year	Comprises £7,739 for indirect overheads and £27,428 for secretarial staff costs.
E. Ongoing training	£2,155 per year	Calculated using information provided by the London Deanery. ⁴ This includes costs for the new two year foundation programme and the speciality run-through grade. ⁵ Costs consist of an amount for the generic curriculum, the postgraduate centres infrastructure costs, study leave and the costs of course organisers, admin support, trainers workshops, vocational training and Internal courses for GP tutors. Excluded are the costs of exceptional training (£100 per trainee) and a cost for the running of the library postgraduate centres.
F. Capital overheads	£4,610 per year	Based on the new build and land requirements of NHS facilities. ^{6,7} Includes shared use of consultation and examination areas, and designated secretarial office space. Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
Working time	41.4 weeks per annum 40 hours per week	Includes 30 days annual leave and 8 statutory leave days. ⁸ The new contract aimed to reduce the number of hours that consultants worked, including aligning with the Working Time Directive and based funding assumptions on consultants working an average 43 hours. A typical contract is based on 40 hours per week. ⁸ The average working week for those with an NHS component to their contract averaged 59 hours. ⁹
Ratio of direct to indirect time on/in: patient-related activity operating theatre	1:0.35 1:2.17	Assuming 68 per cent of consultant time spent on patient-related activity and 29 per cent in theatre. ¹⁰ Time spent teaching has been disregarded, and non-contact time has been treated as an overhead on time spent in patient contact.
London multiplier	1.18 x (A to E) 1.34 x F	Allows for the higher costs associated with London compared to the national average cost. ¹¹ Building Cost Information Service and Department for Communities and Local Government. ^{6,7}
Non-London multiplier	1.00 x (A to E) 0.96 x F	Allows for the lower costs associated with working outside London compared to the national average cost. ¹¹ Building Cost Information Service and Department for Communities and Local Government. ^{6,7}
Unit costs available 2006/2007 (costs including qualifications given in brackets)		
£115 (£132) per contract hour; £363 (£418) per hour operating; £155 (£178) per patient-related hour (includes A to F).		

1 Personal communication with the Department of Health (2007).

2 NHS Employers (2007) *Pay Circular (M&D)(W)3/2006*, NHS Employers, London.

3 Netten, A., Knight, J., Dennett, J., Cooley, R. & Slight, A. (1998) *Development of a Ready Reckoner for Staff Costs in the NHS, Vols 1 & 2*, Personal Social Services Research Unit, University of Kent, Canterbury.

4 Personal communication with the London Deanery.

5 NHS Employers (2006) *Modernising Medical Careers: A New Era in Medical Training*, NHS Employers, London.

6 Building Cost Information Service (2007) *Surveys of Tender Prices*, March, BCIS, Royal Institution of Chartered Surveyors, London.

7 Based on personal communication with the Department for Communities and Local Government (2007).

8 National Audit Office (2007) *Report by the Comptroller and Auditor General/HC 335 Session 2006-2007/19 April. Pay Modernisation:A New Contract for NHS Consultants in England*, National Audit Office, London.

9 British Medical Association (2006) *Caring for the NHS, Press Information Briefing: the Consultant and GP Contracts*, British Medical Association, <http://www.bma.org.uk/ap.nsf/Content/Pressinfobriefingconsultant>.

10 Audit Commission (1996) *The Doctors' Tale Continued*, HMSO, London.

11 Based on personal correspondence with the Department of Health (2007).

14.6 Consultant: psychiatric

Costs and unit estimation	2006/2007 value	Notes
A. Wages/salary	£117,834 per year	Based on personal correspondence with the Department of Health on average consultant earnings ¹ . Average salary without these supplements is £86,153. On-call payments are included and clinical excellence awards are based on the midpoint of those awarded (£19,950). See NHS Employers pay circular for consultant pay and allowances. ²
B. Salary oncosts	£29,917 per year	Employers' national insurance plus 14 per cent of salary for employers' contribution to superannuation.
C. Qualifications	£28,454 per year	The equivalent annual cost of pre-registration medical training and post-graduate medical education. The investment in training of a medical degree, one year spent as a pre-registration house officer, two years as a senior house officer and four years as a specialist registrar have been annuitised over the expected working life of the consultant. ³ See 7.5 for further details on training for health professionals.
D. Overheads	£35,167 per year	Comprises £7,739 for indirect overheads and £27,428 for secretarial staff costs.
E. Ongoing training	£2,155 per year	Calculated using information provided by the London Deanery. ⁴ This includes costs for the new two year foundation programme and the speciality run-through grade. ⁵
F. Capital overheads	£4,610 per year	Based on the new build and land requirements of NHS facilities. ^{6,7} Includes shared use of consultation and examination areas, and designated secretarial office space. Capital costs have been annuitised over 60 years at a discount rate of 3.5 per cent.
Working time	41.4 weeks per annum 40 hours per week	Includes 30 days annual leave and 8 statutory leave days. Assumes 10 study/training days, and 5 days sickness leave. The new contract aimed to reduce the number of hours that consultants worked, including aligning with the Working Time Directive and based funding assumptions on consultants working an average 43 hours. A typical contract is based on 40 hours per week. ⁸ The average working week for those with an NHS component to their contract averaged 59 hours. ⁹
Ratio of direct to indirect time on: face-to-face contacts patient-related activity	1:2.03 1:0.94	Information taken from a study carried out by the Institute of Psychiatry based on a response rate of 41.3% of a sample of 500 consultants. ¹⁰ The proportion of working time spent on different activities was estimated as follows: face-to-face settings including contact with patients, carrying out assessments and contact with family members 33%, other patient related activities added a further 18% per cent when travelling and an estimated 50% of total time spent in meetings was added; non patient related activities including writing/administration research/training/development was added and also an estimated 50% of total time spent on meetings.
London multiplier	1.18 x (A to E) 1.34 x F	Allows for the higher costs associated with London compared to the national average cost. ¹¹ Building Cost Information Service and Department for Communities and Local Government. ^{6,7}
Non-London multiplier	1.00 x (A to E) 0.96 x F	Allows for the lower costs associated with working outside London compared to the national average cost. ¹¹ Building Cost Information Service and Department for Communities and Local Government. ^{6,7}
Unit costs available 2006/2007 (costs including qualifications given in brackets)		
£115 (£132) per contract hour; £223 (£256) per patient-related hour; £378 (£435) per hour patient contact (includes A to F).		

1 Personal communication with the Department of Health (2007).

2 NHS Employers (2007) *Pay Circular (M&D)(W)3/2006*, NHS Employers, London.

3 Netten, A., Knight, J., Dennett, J., Cooley, R. & Slight, A. (1998) *Development of a Ready Reckoner for Staff Costs in the NHS*, Vols 1 & 2, Personal Social Services Research Unit, University of Kent, Canterbury.

4 Personal communication with the London Deanery.

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