

LTFT pay for the 2016 Junior doctor contract

This is a guide for LTFT trainees who are being paid according to the 2016 Junior doctor contract. (I.e. trainees who are not eligible for pay protection that entitles them to be paid according to the terms of the old contract) It has been updated to reflect the changes negotiated by the BMA in June 2019. It has been composed by a trainee in the Northern School of Anaesthesia as a guide to aid trainees in understanding their own pay, and is not intended for any other purpose.

Types of pay protection

There are two types of pay protection for doctors on the 2016 contract, section 1 and section 2.

Section 1 pay protection i.e cash floor

Section 1 pay protection covers foundation doctors, core trainees and doctors in the early stages of run-through training. If you were not yet ST3 or CT3 on 2nd August 2016 you will be covered by Section 1.

Pay protection for section one trainees will be through calculation of a cash floor. Should earnings under the 2016 contract be lower than this cash floor amount, an additional payment will be made to make up the difference. The cash floor is calculated as:

- the value of incremental point on the day immediately prior to moving to the 2016 TCS, plus
- the value of the banding supplement payable on 31 October 2015

If you subsequently move to LTFT then your cash floor amount will be the full time calculation (as above) multiplied by your LTFT percentage (eg 0.6 or 0.8)

Section 2 pay protection

Section two covers doctors in higher specialty training and the later stages of run-through training. Doctors in section two include:

- Doctors already at ST3 or above on a run-through training programme on or in higher specialty training programmes on 2 August 2016.
- Doctors in section two will continue to be paid a basic salary based on the current 2002 New Deal pay scales (MN37), annual increments and a banding payment. A banding questionnaire is included with the TCS as Annex B for the purposes of calculating the banding supplement payable.

So if you were ST3 or above on 2nd August 2016 you should be paid according to the terms of the old contract, even if you were FT and then switched to LTFT because this is an amendment to your contract rather than a new contract. This means you are paid according to your LTFT percentage, plus a banding supplement (usually 1a banding or 50%). Your pay should continue to increment each calendar year, as it would have done on the old contract.

How long will pay protection apply?

-The 2016 contract provides for transitional pay protection to apply for four years of continuous employment from the point at which a doctor moves to the new contract, or until they exit training.

-If during the period of transition a doctor is absent from work on maternity leave, adoption leave, shared parental leave, or long-term sick leave (more than three consecutive months), this period can be extended by the length of that absence up to a maximum of two years, or until they exit training.

-Doctors training less than full time (LTFT) will have their period of transitional pay protection extended to reflect the full time equivalent entitlement. For example, a trainee working at 80 percent FTE will receive pay protection for five years, or until (s)he exits training

The above originally came with a caveat that pay protection would end abruptly on 3 August 2022, however following the 2019 contract review this has now been extended until 2025. This means if you are covered by section 2 pay protection (which is more generous in the latter stages of training) but do not CCT by 2025 you could see a significant drop in your pay. Realistically it is anticipated most trainees who had reached ST3 by August 2nd 2016 will CCT by 2025, even if they have periods of absence or work LTFT as outlined above.

Your pay slip explained

Juniors new payslip guide

ASSIGNMENT NUMBER	EMPLOYEE NAME		LOCATION	
DEPARTMENT	JOB TITLE		Payscale DESCRIPTION	
	SAL/WAGE xx,xxxxxx	INC.DATE	STANDARD HRS 40	PT SAL/WAGE xx,xxxxxx
	TAX OFFICE NAME	TAX OFFICE REF	TAX CODE	NI NUMBER
PAY AND ALLOWANCES				
DESCRIPTION	WKD/EARNED	PAID/DUE	RATE	AMOUNT
Basic pay Additional rostered hours Night duty Weekend allowance Non-resident on-call Flexible pay premia Cash floor protection	Relevant information on hours worked, rates of pay, and what is being paid this month will be contained in these sections. NOTE not all doctors will receive all pay elements*.	*Same applies	*Same applies	xx,xxxxxx xxxxxx xxxxxx xxxxxx xxxxxx xxxxxx

Basic pay
The relevant nodal pay point for your grade, calculated on an average of 40 hours' work per week.

Additional rostered hours
Any additional contracted hours over 40 (up to maximum of 48 in total, or 56 for doctors who have opted out of the Working Time Regulations).

Night duty
Any hours receiving an enhanced rate of 37% of your hourly basic pay.

Weekend allowance
An allowance set as a percentage of your basic salary for working 1 in 8 or more frequent weekends.

Non-resident on-call
An allowance of 8% of your basic salary to compensate for your availability while non-resident on-call, regardless of frequency.

Flexible pay premia
Any flexible pay premia that apply, these are currently for emergency medicine, psychiatry, OMFS, academia and GP training, as well as current LTFT trainees and are paid annually.

Cash floor protection
Your protected cash floor amount, calculated as your basic salary the day before you transitioned onto the new TCS, plus a banding supplement for the rota you were working the day before transition (based on the banding value for that rota as on 31 October 2015).

How do I work out what my pay should be according to my work schedule?

For someone being paid on the 2016 terms your pay is effectively made up of 4 parts:

- 1 Basic pay
- 2 Enhanced hours (ie night shifts)
- 3 Weekend allowance
- 4 LTFT allowance

Part 1 basic pay (based on June 2019 Agreement)

This is the most straightforward part to work out. You should have received an individualised work schedule from HR prior to starting a new 6 month rotation. This will tell you how many hours on average you will be expected to work per week (for that particular rota.)

To calculate what your basic salary should be:

1. Find the base salary in the table below (extracted from the BMA-NHS employers June 2019 agreement)

	18/19	19/20	20/21	21/22	22/23
NP1 - F1	£27,146	£27,689	£28,243	£28,808	£29,384
NP2 - F2	£31,422	£32,050	£32,691	£33,345	£34,012
NP3 - ST1-2	£37,191	£37,935	£38,694	£39,467	£40,257
NP4 - ST3-5	£47,132	£48,075	£49,036	£50,017	£51,017
NP5 - ST6-8	£47,132	£48,075	£52,036	£56,077	£58,398

*Values based on 2% uplift per annum.

**NP5 includes additional investment of £3k in 20/21, £3k in 21/22, and £1.2k in 22/23 on top of the 2% uplifts to salaries

***Note that these represent substantive pay values and increases may be implemented part way through the year.

eg for a FT registrar (in 2018/19) on nodal point 4 the base annual salary is 47132.

2. Multiply this by however many hours you work on average (e.g. 28.5 in the example work schedule) then divide by 40 (the number of hours you would work for basic pay if you were FT)

So for the example above the basic pay part of your salary should be:

47132 (base annual salary for registrar) x (28.5/40) your average contracted hours
=33581.55 per annum

Example work schedule for LTFT 60%

Rota Template:

Week No.	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
1	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00	19:30 - 08:30	19:30 - 08:30	19:30 - 08:30
2	00:00 - 00:00	00:00 - 00:00	08:00 - 20:00	08:00 - 18:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00
3	00:00 - 00:00	00:00 - 00:00	08:00 - 18:00	08:00 - 20:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00
4	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00	08:00 - 18:00	08:00 - 18:00	00:00 - 00:00	00:00 - 00:00
5	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00	08:00 - 20:00	08:00 - 20:00	08:00 - 20:00
6	00:00 - 00:00	08:00 - 18:00	08:00 - 18:00	08:00 - 18:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00
7	00:00 - 00:00	08:00 - 18:00	08:00 - 18:00	08:00 - 18:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00
8	08:00 - 20:00	08:00 - 18:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00
9	00:00 - 00:00	08:00 - 20:00	08:00 - 18:00	08:00 - 18:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00
10	00:00 - 00:00	08:00 - 18:00	08:00 - 18:00	08:00 - 20:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00
11	19:30 - 08:30	19:30 - 08:30	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00
12	08:00 - 18:00	08:00 - 18:00	08:00 - 18:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00
13	00:00 - 00:00	00:00 - 00:00	19:30 - 08:30	19:30 - 08:30	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00
14	00:00 - 00:00	08:00 - 18:00	08:00 - 18:00	08:00 - 18:00	00:00 - 00:00	00:00 - 00:00	00:00 - 00:00

Your working pattern is arranged across a rota cycle of 14 weeks, and includes:

21 Standard Days (Blue)

8 Long Days – of which 2 will fall on a Saturday/Sunday (Yellow)

7 Night Shifts (2 of which will be on a weekend) (Orange)

62 Zero Days (Purple)

Average Weekly Hours of Work: 28.50

This figure is the average weekly hours, based on the length of your rota cycle. This may not represent your actual hours of work in any given week.

Your contract is a part-time contract for 28.50 hours per week.

The distribution of these will be as follows:

Average weekly hours at basic hourly rate: 22.75

Average weekly hours attracting a 37% enhancement: 5.75

BASIC PAY HOURS

ENHANCED PAY HOURS

Part 2 enhanced hours / night shifts

How much you get paid for night shifts will depend on how many hours per week on average attract an enhanced rate (additional 37% pay)

For any shift starting after 20.00 all hours worked attract an enhanced rate (up until 10.00 the following morning) but if the shift starts before 20.00 (as in the work schedule above) you may only get paid the enhanced rate for hours after 21.00 (new contract states only hours worked between 21.00-07.00 attract an enhanced rate, unless the shift starts at 20.00 or later in which case you get paid an enhanced rate for the whole shift)

As you can tell the number of hours you work on “night shifts” and the number of hours attracting an “enhanced rate” may not be the same. The golden rule is if the shift starts 20.00 or later- all hours worked count as enhanced, if it starts earlier than 20.00 only hours worked after 21.00 count.

So go back to your work schedule from HR-

- 1 work out how many hours on each night shift will attract an enhanced rate. In the example above it is 11.5 hours per night shift (21.00-0830).
- 2 Calculate the number of night shifts that you will work per week on average (the example above is 7 night shifts in 14 weeks so 0.5 night shifts per week)
- 3 Calculate how many hours on average attract an enhanced rate per week (e.g. the above example would be 11.5 hours per shift x 0.5 shifts per week= 5.75 hours enhanced pay per week)

- 4 Work out what your basic hourly pay is (eg 47132 divide by 52 weeks per year divide by 40 hours per week is £22.65 per hour)
- 5 Calculate what the enhanced pay is worth (37%, or 0.37 x hourly rate of £22.65 = £8.38 extra per hour)
- 6 Work out how much extra you get per week for enhanced hours (5.75 enhanced hours per week x £8.38 extra per hour =£48.20 per week)
- 7 Work out how much this is per annum by multiplying by 52 (£48.20 x 52= 2506.40 per year)

Part 3 weekend allowance

This is paid as a small percentage of the FT basic salary depending on the frequency of your weekend on calls. For someone that is LTFT this can be challenging to calculate as the amount you are paid varies according to the number of weekends you work compared to a FT colleague.

Most full time rotas in anaesthesia involve working around 1 in 4 weekends. As someone working LTFT you are paid a fraction of the FT supplement according to the % you contribute to on call rota compared to someone who works FT (this may be different to your LTFT % of 0.6 or 0.8)

This is an extract from the full terms of the 2016 contract (see useful websites) and can be found on page 11.

Weekend allowance

5. A doctor rostered to work at the weekend (defined as one or more shifts/duty periods beginning on a Saturday or a Sunday) at a minimum frequency of 1 in 8 across the length of the rota cycle will be paid an allowance. These will be set as a percentage of full time basic salary in accordance with the rates set out in the table below:

Frequency	Percentage
1 weekend in 2	10%
Less frequently than 1 weekend in 2 and greater than or equal to 1 weekend in 4	7.5%
Less frequently than 1 weekend in 4 and greater than or equal to 1 weekend in 5	6%
Less frequently than 1 weekend in 5 and greater than or equal to 1 weekend in 7	4%
Less frequently than 1 weekend in 7 and greater than or equal to 1 weekend in 8	3%
Less frequently than 1 weekend in 8	No allowance

6. A doctor working less than full time will also be entitled to be paid this allowance when working on a rota where the doctors working full time on that same rota are in receipt of such an allowance. The allowance paid to the doctor working less than full time will be paid pro rata, based on the proportion of the full time commitment to the weekend rota that has been agreed in the doctor's work schedule. For example, a doctor making a 50 per cent contribution to the rota would be paid 50 per cent of the value of the availability allowance paid to a doctor making a full contribution to the rota.

If a FT trainee is expected to work 1 in 4 weekends, and you are LTFT 0.8 but also working 1 in 4 weekends on your work schedule then you should get paid the same supplement as your full time colleague (7.5% of FT base salary)

If your full time colleague works 1 in 4 weekends but you are LTFT 0.6 and only working 1 in 8 weekends on your work schedule you would only be entitled to 0.5 of the supplement your FT colleague receives (3.75 % of FT base salary) rather than 0.6 of the FT supplement. This is also different to the supplement that you would get if you FT but working 1 in 8 weekends (see table above, which would only be 3% of FT base salary) There is an online calculator you can use to try and work out what percentage you contribute to the rota compared to someone who is full time (see useful websites) HR may simply give you the amount for the number of weekends you work. For example in the work schedule above of a 0.6 LTFT trainee working 2 out of 14 weekends (1 in 7) the allowance was 4%, which is what a FT trainee would get for working 1 in 7 weekends You can work out what this should be per annum by looking at your nodal point, and then multiplying by the % allowance as per the table above.

E.g. 47132 (FT basic pay) x 4% (for working 1 in 7 weekends)= £1885 per annum

This is a bit of a shortcut by HR, but without having a work schedule for a full time person working the same rota it is not actually possible to work out what the correct weekend allowance would be.

Amendment to weekend pay effective from December 2019

From December 2019 the weekend allowance rates are changing according to the June 2019 contract agreement. The new rates are shown in a table below

Frequency of Weekends	Percentage of FT base salary
1 in 2	15%
1 in 3	10%
less than 1 in 3, but equal or more than 1 in 6	5%
less than 1 in 6	No allowance

Most FT anaesthetic and ICU rotas involve working 1 in 4 weekends, which would attract a 5% uplift. If you are LTFT 0.8 this equates to around 1 in 5 weekends (usually 5 weekends per 6 months), and LTFT 0.6 this equates to around 1 in 6 weekends (usually 4 weekends per 6 months).

How this will be reflected in LTFT pay by HR remains unclear (ie whether it will be paid at 5% FT base salary as per the table above, or pro-rata of the 5% FT base salary given to FT trainees, who will work more weekends)

LTFT flexible pay premium / allowance

Some LTFT trainees will be eligible for a £1500 annual allowance if they have schedule 1 pay protection. (see below)

If you are working LTFT and in receipt of 'Section 1' pay protection, you are entitled to a flexible pay premium provided that:

- **you were working LTFT on 3 August 2016** or
- you were on maternity leave on 2 August 2016 and subsequently returned to training on an LTFT basis

The total amount is £1,500 per year and is fixed for all LTFT trainees, irrespective of the overall percentage you are working. This figure is divided by 12 and paid monthly on top of your basic salary, and is not pensionable.

You would **NOT** be eligible for this £1,500 allowance if you started working LTFT after August 3rd 2016

This pay premium will be replaced by a new £1000 allowance paid to all LTFT trainees under the June 2019 agreement and will come into effect from December 2019 (see extract below) Unlike the £1500 flexible pay premium it **will apply to trainees who became LTFT after August 2016**, and it will be ongoing beyond transitional pay arrangements

Equalities, LTFT, and flexible training

1. LTFT allowance

1.1 Any doctor who is training less-than-full time will be paid an annual allowance of £1,000 for as long as they continue to train less-than-full-time. This is a fixed amount which will apply to any LTFT trainee regardless of their LTFT percentage and will be paid on top of their usual salary/any other pay elements. The allowance will be spread out over the year and paid in monthly instalments. This will come into effect from December 2019.

1.2 Those trainees who are already in receipt of the £1,500 transitional LTFT allowance will continue to receive this as per Schedule 14, but will not receive the £1,000 permanent allowance on top of this. Once their entitlement to the transitional £1,500 allowance ends, they will then receive the £1,000 allowance.

How do I know if my work schedule is correct?

As you can see you get paid according to your work schedule and average hours, rather than the actual hours that you work on your rota. It is important to have a close look at your rota to make sure that your actual hours, weekends and night shifts do not exceed what you expected from your work schedule.

If your actual hours exceed your work schedule do you need to get in touch with your rota writer who may be able to help things average out over the placement. If they are not able to help and you feel your work schedule is not a fair reflection of the hours you have actually worked you can contact the guardian of safe working at your trust. The LTFT rep on the trainee committee may also be able to help.

Where do I go for further information and help?

The BMA have a rota and contract checking service, although I would encourage everyone to look through their own work schedule, payslips and rota, so that if any differences do crop up you understand where the discrepancies may have arisen from.

If you wish to contact HR directly, if you have not received a work schedule or think that the pay calculated from your work schedule is incorrect then the best person to contact is Amber Minto, Amber.Minto@hee.nhs.uk

You can get in touch with the LTFT training rep at LTFTnorthern@gmail.com¹

Useful websites

Guidance for LTFT trainees from NHS employers

https://www.nhsemployers.org/-/media/Employers/Documents/Need-to-know/LTFT-pay-guidance_February-2017.pdf?la=en&hash=0A47EB081F3967821D4718B9126F8464929B6368

Guidance for LTFT trainees (re: pay) from BMA

<https://www.bma.org.uk/features/lessthanfulltimetrainees/>

Full terms and conditions of 2016 contract (version 4 correct as of March 2018)

<https://www.nhsemployers.org/-/media/Employers/Documents/Pay-and-reward/Junior-Doctors/NHS-Doctors-and-Dentists-in-Training-England-TCS-2016-VERSION-4.pdf>

June 2019 BMA agreement guidance (includes link to agreement in full)

<https://www.bma.org.uk/collective-voice/influence/key-negotiations/terms-and-conditions/junior-doctor-contract-negotiations/agreed-new-contract-deal-for-junior-doctors-in-england>

2018/2019 Pay scale for doctors in training (see annex A on page 6)

<https://www.nhsemployers.org/-/media/Employers/Documents/Pay-and-reward/Pay-and-Conditions-Circular-MD-32018-270918.pdf?la=en&hash=01F967307A1568133D47942391371AE2B78F5461>

2018/2019 Pay scales for doctors in training (BMA)

<https://www.bma.org.uk/advice/employment/pay/juniors-pay-england>

Transitional pay / pay protection FAQs (BMA)

<https://www.bma.org.uk/advice/employment/contracts/junior-doctor-contract/transition>

Transitional pay/ pay protection FAQs (NHS employers)

<https://www.nhsemployers.org/your-workforce/pay-and-reward/medical-staff/doctors-and-dentists-in-training/transition/copy-of-pay-protection-faqs-updated-july>

LTFT weekend commitment calculator

<https://www.nhsemployers.org/-/media/Employers/Documents/Pay-and-reward/Junior-Doctors/LTFT-allowance-calculator-updated-1920-values.xlsx?la=en&hash=D84DB6568E6E04546BC8DB7726B50D6B1AE2620A>

BMA LTFT guidance (not specific to pay issues)

<https://www.bma.org.uk/-/media/files/pdfs/collective%20voice/committees/gpc/priorities/less-than-full-time-guidance.pdf?la=en>

¹ This guide was written by Sarah Dawson who is a LTFT trainee in the Northern School of Anaesthesia