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## 1. Introduction

This guidance applies to all clinical academic staff employed by the University of Nottingham on either the new Consultant Contract or Senior Academic GP Salary Scales, designated in this policy as “senior clinical academics”.

Consultants and Senior GPs on clinical academic contracts work in higher education institutions (HEIs) in a teaching and/or research role, as well as practising clinically in the NHS. At the University of Nottingham, these medically-qualified clinical academic staff are employed as Clinical Associate Professors or Clinical Professors.

The University’s employment of senior clinical academics are based on the Follett principles, which should also be applied to pay progression for senior clinical academics. Therefore, both the University and NHS organisation in which the senior clinical academic holds an Honorary Clinical Contract should work in partnership to complete approvals for pay progression.

This guidance on pay progression is based on the provisions specified in the new [Terms and Conditions](#) for consultant-level clinical academic staff introduced from 1 April 2003, amended 1 April 2024.

It will be the norm for senior clinical academics (Consultants and Senior GPs on clinical academic contracts) to achieve pay progression as the intention of including pay progression in the new national Terms and Conditions for clinical academic staff was not to prevent those who are achieving expected standards from moving through the pay scale, but to ensure consistency of approach and a minimum standard for progression.

The University and senior clinical academic employees will be expected to identify problems affecting the likelihood of pay progression as they emerge to allow time for possible solutions to be found.

Senior clinical academics should be given the appropriate time and resource to meet the pay progression criteria. Senior clinical academics should discuss this with their University line manager.

## 2. Pay thresholds

There are now five pay points on the consultant pay scale (table below). For four of those points, senior clinical academics will be required to meet prescribed criteria to be eligible to progress up the pay scale on their increment date. The pay progression points are after three, four, eight and 14 years of consultant/senior academic GP service.

Pay progression reviews are required between every pay progression point except that no pay progression review will be required to move from NHS pay point 2a to NHS pay point 2b (UoN spine point 2 to UoN spine point 3)/

The following table demonstrates the structure of the pay scale applied at the University aligned to the NHS threshold points.

| Spine point on the <a href="#">UoN New Consultant Salary Scale</a> | NHS Salary Point | Years completed as a Consultant | Period before eligibility for next threshold |
|--------------------------------------------------------------------|------------------|---------------------------------|----------------------------------------------|
| 1                                                                  | 1                | 0                               | 3 years                                      |
|                                                                    |                  | 1 year                          | 2 years                                      |
|                                                                    |                  | 2 years                         | 1 year                                       |
| 2                                                                  | 2a               | 3 years                         | 1 year                                       |
| 3                                                                  | 2b               | 4 years                         | 4 years                                      |
|                                                                    |                  | 5 years                         | 3 years                                      |
|                                                                    |                  | 6 years                         | 2 years                                      |
|                                                                    |                  | 7 years                         | 1 year                                       |
| 4                                                                  | 3                | 8 years                         | 6 years                                      |
|                                                                    |                  | 9 years                         | 5 years                                      |
|                                                                    |                  | 10 years                        | 4 years                                      |
|                                                                    |                  | 11 years                        | 3 years                                      |
|                                                                    |                  | 12 years                        | 2 years                                      |
|                                                                    |                  | 13 years                        | 1 year                                       |
| 5                                                                  | 4                | 14 years                        | •                                            |

### 3. Pay progression arrangements

The pay progression process will be as follows.

#### 3.1 Pay progression eligibility dates

The date on which a clinical academic becomes eligible for pay progression is determined by their seniority, and either the date they transferred to the new Consultant Contract or Senior Academic GP Contract or the date on which they commenced as a post-CCT clinical academic working at a level equivalent to medically-qualified clinical consultant or Senior Academic GP.

Staff are advised of their dates for pay progression, known as pay threshold dates, by the University's Human Resources (HR) Department, usually at the recruitment stage. HR will notify the employee and their School (eg People Services, School of Medicine; Head of Operations, School of Life or Health Sciences as appropriate) of the pay progression dates for clinical academics employed within the School.

The School will ensure that the University line manager and the employee are aware of this policy at least 8 months before each pay progression date.

The senior clinical academic's University line manager, will arrange a meeting at six months before the pay progression giving six-weeks' notice for the meeting. The University line manager will seek the support of the Director of the Academic Unit (School of Medicine), Head of Department (Schools of Life and Health Sciences) or Deputy Head of School, as appropriate. The meeting and its outcome will be completed a minimum of three months before the pay progression date

### **3.2 Pay progression criteria**

The pay progression requirements that the senior clinical academic employee is expected to have met are set out below:



| Criteria            | National guidance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Pay progression assessment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Job planning</b> | <ul style="list-style-type: none"><li>made every reasonable effort to meet the time and service commitments in their job plan</li><li>participated satisfactorily on reviewing the job plan and the setting of personal objectives (the latter, where applicable)</li><li>met the personal objectives in the job plan or, where this is not achieved for reasons beyond the doctor's control, made every reasonable effort to do so. Where personal objectives have not been required by, and agreed with, the employer or the NHS organisation in which the Honorary Contract is held respectively, it will be noted that this criteria could not be met for reasons beyond the senior clinical academic's control</li><li>worked towards any changes agreed in the last job plan review as being necessary to support achievement of joint objectives.</li></ul> | <p>The senior clinical academic will provide a formal copy of the job plan for the calendar year which includes the pay progression meeting.</p> <p>The job plan should be signed by:</p> <ul style="list-style-type: none"><li>the academic and</li><li>have been 'submitted for signature' to the Trust or GP Practice lead</li></ul> <p>This will be documented on the Trust's/GP Practice electronic appraisal system or, where an electronic GP job planning system does not exist, by way of a copy of written/email confirmation from the GP Practice lead.</p> |
| <b>Appraisal</b>    | <ul style="list-style-type: none"><li>participated satisfactorily in the joint clinical academic appraisal process in accordance with GMC requirements set out in "Good Medical Practice"</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <p>The senior clinical academic will provide a formal copy of the joint clinical academic appraisal for the calendar year for the year which includes the pay progression meeting, unless confirmed as exempt, for example due to maternity leave or extended sick leave.</p> <p>The joint clinical academic appraisal should be signed by:</p> <ul style="list-style-type: none"><li>the academic and</li></ul>                                                                                                                                                       |

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|---------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                           |                                                                                                                                                                                                                                | <ul style="list-style-type: none"> <li>the appraisers</li> </ul> <p>Where the Senior Academic is a practising GP, and criteria to participate in a joint clinical academic appraisal process could not be met for reasons beyond the senior clinical academic's control because of non-engagement of the GP appraiser with joint clinical academic appraisal, the senior clinical academic GP should provide evidence of clinical and academic appraisals for the year which includes the pay progression meeting which demonstrate that the University ADC is sighted of your scope of practice work with confirmation of good practice, conduct and capability at any other organisations in which you undertake duties eg through a multiorganisational work form.</p>                                                                                                                                       |
| <b>Mandatory training</b> | <ul style="list-style-type: none"> <li>engaged with, and participated in, mandatory training or, where this is not achieved for reasons beyond the senior academic's control, made every reasonable effort to do so</li> </ul> | <p>This will be assessed as:</p> <p>a) compliance with University mandatory training as documented as complete on UniCore</p> <p>AND</p> <p>b) either</p> <p>i) a copy of completed compliance in NHS mandatory training (eg compliance in the NHS 'ESR' system)</p> <p><b>or</b></p> <p>ii) where total compliance in all NHS mandatory training elements cannot be demonstrated, this condition will be considered as met if evidence of the following essential skills and knowledge for safe and effective practice below is provided.</p> <ol style="list-style-type: none"> <li>Equality, diversity and human rights</li> <li>Preventing radicalisation</li> <li>Health, safety and welfare</li> <li>NHS conflict resolution</li> <li>Fire safety</li> <li>Infection prevention and control</li> <li>Moving and handling (level 1)</li> <li>Safeguarding adults</li> <li>Safeguarding children</li> </ol> |

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|----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                            |                                                                                                                                                                                                                                                             | <p>j. Information governance<br/><b>or</b></p> <p>iii) evidence that the senior clinical academic has made every effort reasonable effort to achieve compliance in NHS mandatory training elements but has been unable to achieve this through statutory leave or documented denial of access to NHS mandatory training (eg the NHS 'ESR' system).</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <b>11<sup>th</sup> PA</b>  | <ul style="list-style-type: none"> <li>taken up any offer to undertake additional Programmed Activities that the employing organisation has made to the consultant in accordance with Schedule 6 (Appendix 1) of consultant Terms and Conditions</li> </ul> | As the University of Nottingham does not offer additional Programmed Activities to the senior clinical academics it employs, this condition will be considered as met.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <b>Private practice</b>    | <ul style="list-style-type: none"> <li>met the standards of conduct governing the relationship between private practice and NHS commitments set out in Schedule 9 (Appendix 2) including private work being reflected in job plan</li> </ul>                | <p>This will be assessed as either:</p> <ul style="list-style-type: none"> <li>formal written declaration from the senior clinical academic that they are not undertaking private clinical practice AND that this is not included in their job plan or appraisal</li> </ul> <p>OR</p> <ul style="list-style-type: none"> <li>formal written declaration from the senior clinical academic that they are undertaking private clinical practice AND this is included in their job plan AND appraisal.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Conduct/ capability</b> | The consultant has no formal capability processes ongoing or any active formal disciplinary sanctions.                                                                                                                                                      | <p>This will be assessed as either:</p> <ul style="list-style-type: none"> <li>where the senior clinical academic holds an Honorary Contract in an NHS Trust and there are formal NHS capability processes ongoing or active formal NHS disciplinary sanctions, the Trust's MD will inform University Head of School who will notify the HRBP</li> </ul> <p>OR</p> <ul style="list-style-type: none"> <li>where the senior clinical academic is a practising General Practitioner employed by the University on a single joint clinical academic contract, the School team responsible for administering the process will contact the senior clinical academic to request they provide formal written confirmation from their clinical employer whether there are formal capability processes ongoing or active formal disciplinary sanctions. This will be passed to the HRBP.</li> </ul> <p>OR</p> <ul style="list-style-type: none"> <li>where there are formal University capability processes ongoing or active formal University disciplinary sanctions, HRBP will inform the Faculty PVC and this condition will be consider NOT met.</li> </ul> |



### 3.3 Pay progression meeting outcomes

Appendix 4 will be used to document the pay progression process and should be signed by the University line manager and the senior clinical academic.

There are three outcomes from the pay progression meeting:

#### 3.3.1 Pay progression meeting outcome: criteria for pay progression have been met

Where the senior clinical academic has met all of the criteria, or has not met one or more criteria due to reasons beyond their own control:

- the University line manager and senior clinical academic will sign the record form (Appendix 4) and
- the University line manager will forward this to the School team responsible for administering the process. In the School of Medicine, the People Services Team will send the completed form to the Head of School's nominee (the Chair of the School Staffing Committee). In the School of Health Sciences and Life Sciences, the University line manager will send the record form to the relevant Head of School
- Chair of the School of Medicine Staffing Committee or Head of School of Life Sciences or Health Sciences (as relevant to the academic) will countersign the pay progression form, indicating that they have not been notified of any formal NHS capability processes ongoing or active formal NHS disciplinary sanctions by the organisation in which an Honorary Contract is held and pass the signed form to the HRBP
- The HRBP will declare whether there are any formal University capability processes ongoing or active formal University disciplinary sanctions
- The HRBP will determine that all of the criteria for pay progression have been met; this will then be used as the basis for confirmation that the consultant has met the necessary criteria and is achieving expected standards to move to the next pay progression point on the pay scale.

#### 3.3.2 Pay progression meeting outcome: criteria for pay progression have been met subject to further clarification or completion of remedial action.

Where the senior clinical academic has not met one or more of the criteria, but all other criteria have been met (or have not been met due to reasons beyond their own control), remedial action should be agreed where the remedial action can be achieved before the pay progression date.

Once the remedial action is completed, the University line manager and senior clinical academic will sign the record form (Appendix 4) and

- the University line manager will forward this to the School team responsible for administering the process. In the School of Medicine, the People Services Team will send the completed form to the Head of School's nominee (the Chair of the School Staffing Committee). In the School of Health Sciences and Life Sciences, the University line manager will send the record form to the relevant Head of School

- Chair of the School of Medicine Staffing Committee or Head of School of Life Sciences or Health Sciences (as relevant to the academic) will countersign the pay progression form, indicating that they have not been notified of any ongoing formal NHS capability processes or active formal NHS disciplinary sanctions by the organisation in which an Honorary Contract is held, and pass the signed form to the HRBP
- The HRBP will declare whether there are any formal University capability processes ongoing or active formal University disciplinary sanctions
- The HRBP will determine that all of the criteria for pay progression have been met; this will then be used as the basis for confirmation that the consultant has met the necessary criteria and is achieving expected standards to move to the next pay progression point on the pay scale.

### **3.3.3 Pay progression meeting outcome: criteria for pay progression have not been met.**

Where the senior clinical academic has not met one or more of the criteria and remedial action cannot be completed before the pay progression date, the University line manager, and senior clinical academic will agree an action plan, with timescales, to set out how the senior clinical academic can meet the criteria. The action plan will forward this to the School team responsible for administering the process. In the School of Medicine, the People Services Team will send the completed form to the Chair of the School Staffing Committee to agree the action plan. In the School of Health Sciences and Life Sciences, the University line manager will send the record form to the relevant Head of School.

Of note:

- withholding progression shall not be used as a means to coerce a senior clinical academic into agreeing a proposed job plan. The absence of an agreed job plan owing to reasons beyond the senior clinical academic's control, or an open job-plan dispute process, will not prevent pay progression. Where the job plan has not been agreed, it is the onus of the employer to work with the senior clinical academic and the relevant NHS body to agree a job plan as soon as is practicable
- progression cannot be withheld due to financial or other non-performance related issues

If the Head of School or their nominee (eg the Chair of the School Staffing Committee) disagrees and feels the criteria have been met, they will inform line manager and institute the necessary action to apply pay progression.

If the Head of School's nominee (eg the Chair of the School Staffing Committee) upholds the line manager's decision that the pay progression criteria have not been met, the senior clinical academic will not progress to the next pay point. Pay progression will be delayed by one year and will be reviewed before the next incremental date.

Another pay progression meeting should be arranged six months, but no later than three months, before the senior clinical academic's next incremental date. If at that point, the senior clinical academic has met all the criteria (or has not met criteria, but for reasons beyond their control), the process in 2.3.1 above should be followed ie the University line manager and senior clinical academic will sign the record form (Appendix 4) and the University line manager will forward this to the School team responsible for administering the process. In the School of Medicine, the People Services Team will send the completed form to the Chair of the School Staffing Committee (eg the Chair of the School Staffing Committee). In the School of Health Sciences and Life Sciences, the University line manager will send the record form to the relevant Head of School.

### **3.3.4 Right of appeal**

An employee has the right of mediation and appeal against a decision of the line manager.

Where a senior clinical academic disputes a decision that they have not met the required criteria to progress to the next pay point, the mediation and appeals framework in Appendix 3 shall be followed and:

- the decisions of the appeal panel will be final
- if the appeal panel deems that the senior clinical academic has met the pay progression criteria, the senior clinical academic will advance to the next pay threshold with payment of back pay to the relevant incremental date that is, there will be no loss of pay incurred as a result of a delayed decision on pay progression
- if the decision is upheld, the senior clinical academic will remain on their current pay point but will be eligible for pay progression if they meet the criteria at their next incremental date (that is, no later than 12 months after they were first eligible for pay progression)

### **3.4 Moving employers**

If a senior clinical academic is due to move employers and the pay progression meeting is due within six months of their last working day, the pay progression meeting shall take place before the senior clinical academic moves to their new employer. The completed Record Form will be given to the employee to provide to the new employer or, the employee may choose to give appropriate consent under GDPR legislation for the University employer to share with the new employer directly.

### **3.5 Absence from work at the time pay progression review is due**

If a senior clinical academic is absent from work for reasons such as parental or sickness leave when pay progression is due, the principle of equal and fair treatment should be followed so that no detriment is suffered as a result.

In the case of planned long-term paid absence such as maternity, adoption and shared parental leave, the pay progression review can be conducted early if this is reasonable and practical, allowing the pay progression to be applied on their pay progression date in their absence. If a pay progression review cannot be conducted prior to the pay progression date, pay progression should be automatically applied in the individual's absence on the pay progression date.

### **3.6 Capability processes**

It is recognised that capability and disciplinary process can have a significant impact on the health and wellbeing of senior clinical academics who are being investigated. Employers have a duty of care to do everything they can to ensure that such process are conducted in a timely manner and that there are no unnecessary delays.

In instances where pay progression has been withheld due to an ongoing NHS capability process, this will be kept under regular review by the University's HR Employee Relations Team. The pay progression review meeting should take place six months, but no later than three months, prior to the senior clinical academic's next pay progression date. Such a review must include appropriate details of why pay progression was withheld and outline the reasons why the process has not been concluded. If the NHS capability process does not find any significant cause for concern, pay progression should be actioned without delay and back pay should be paid where applicable.

## Appendix 1

Schedule 6 of the new [Terms and Conditions](#) for consultant-level clinical academic staff introduced from 1 April 2003, amended 1 April 2024 states:

### Extra programmed activities and spare professional capacity

- 1) Where a consultant intends to undertake remunerated clinical work that falls under the definition of Private Professional Services other than such work specified in his or her Job Plan, whether for the NHS, for the independent sector, or for another party, the provisions in this Schedule will apply.
- 2) Where a consultant intends to undertake such work:
  - the consultant will first consult with his or her clinical manager
  - the employing organisation may, but is not obliged to, offer the consultant the opportunity to carry out under these Terms and Conditions (including the remuneration arrangements contained in these Terms and Conditions) up to one extra Programmed Activity per week on top of the standard commitment set out in his or her contract of employment, subject to the provisions in paragraph 7 for consultants who have previously held a maximum part-time NHS consultant contract
  - additional Programmed Activities may be offered on a fixed basis, but where possible the employing organisation will offer them on a mutually agreed annualised basis. Where consultants prospectively agree to extra Programmed Activities these will be remunerated
  - where possible, the employing organisation will put any such offer to the consultant at the annual Job Plan review but, unless the employing organisation and consultant agree otherwise, no fewer than three months in advance of the start of the proposed extra Programmed Activities, or six months in advance where the work would mean the consultant has to reschedule external commitments
  - there will be a minimum notice period of three months for termination of these additional activities. If a consultant ceases to undertake Private Professional Services, he/she may relinquish the additional Programmed Activity subject to a similar notice period
  - the employing organisation will give all clinically appropriate consultants an equal opportunity to express an interest in undertaking these additional activities. Any offer or acceptance should be made in writing
  - full-time consultants who are currently working the equivalent of 11 or more Programmed Activities and agree with their clinical manager that the same level of activity should form part of their Job Plan under the new contract will not be expected to offer any additional work on top of this
  - part-time consultants who wish to use some of their non-NHS time to do private practice will not be expected to offer any more than one extra Programmed Activity on top of their normal working week
- 3) If a consultant declines the opportunity to take up additional Programmed Activities that are offered in line with the provisions above, and the consultant subsequently undertakes remunerated clinical work as defined above, this will constitute one of the grounds for deferring a pay threshold in respect of the year in question. If another consultant in the group accepts the work, there will be no impact on pay progression for any consultant in the group.
- 4) Where a consultant works for more than one NHS employer, the employers concerned may each offer additional Programmed Activities, but the consultant will not be expected to undertake on average any more than one Programmed Activity per week to meet the relevant criterion for pay thresholds. The job planning process should be used to agree for which employing organisation any additional Programmed Activities should be undertaken.

- 5) Should there be any significant increase in the time a part-time consultant working between seven and nine Programmed Activities devotes to Private Professional Services, the consultant will notify the employing organisation and the consultant and employing organisation may review the number of Programmed Activities in the consultant's Job Plan.
- 6) The provisions in this Schedule are without prejudice to the possibility that the consultant and employing organisation may wish to agree extra programmed activities up to the maximum level consistent with the Working Time Regulations.

## Appendix 2

Schedule 9 of the new [Terms and Conditions](#) for consultant-level clinical academic staff introduced from 1 April 2003, amended 1 April 2024 states:

### **Provisions governing the relationship between NHS work, private practice and fee paying services**

1. This Schedule should be read in conjunction with the 'Code of Conduct for Private Practice', which sets out standards of best practice governing the relationship between NHS work, private practice and fee paying services.
2. The consultant is responsible for ensuring that the provision of Private Professional Services or Fee Paying Services for other organisations does not:
  - result in detriment of NHS patients or services
  - diminish the public resources that are available for the NHS

#### Disclosure of information about private commitments

3. The consultant will inform his or her clinical manager of any regular commitments in respect of Private Professional Services or Fee Paying Services. This information will include the planned location, timing and broad type of work involved.
4. The consultant will disclose this information at least annually as part of the Job Plan Review. The consultant will provide information in advance about any significant changes to this information.

### **Scheduling of work and job planning**

5. Where there would otherwise be a conflict or potential conflict of interest, NHS commitments must take precedence over private work. Subject to paragraphs 10 and 11 below, the consultant is responsible for ensuring that private commitments do not conflict with Programmed Activities.
6. Regular private commitments must be noted in the Job Plan.
7. Circumstances may also arise in which a consultant needs to provide emergency treatment for private patients during time when he or she is scheduled to be undertaking Programmed Activities. The consultant will make alternative arrangements to provide cover if emergency work of this kind regularly impacts on the delivery of Programmed Activities.
8. The consultant should ensure that there are arrangements in place, such that there can be no significant risk of private commitments disrupting NHS commitments, eg by causing NHS activities to begin late or to be cancelled. In particular, where a consultant is providing private services that are likely to result in the occurrence of emergency work, he or she should ensure that there is sufficient time before the scheduled start of Programmed Activities for such emergency work to be carried out.
9. Where the employing organisation has proposed a change to the scheduling of a consultant's NHS work, it will allow the consultant a reasonable period in line with Schedule 6, paragraph 2 to rearrange any private commitments. The employing organisation will take into account any binding commitments that the consultant may have entered into (eg leases). Should a consultant wish to reschedule private commitments to a time that would conflict with Programmed Activities, he or she should raise the matter with the clinical manager at the earliest opportunity.

## **Scheduling private commitments whilst on-call**

10. The consultant will comply with the provisions in Schedule 8, paragraph 5 of these Terms and Conditions.
11. In addition, where a consultant is asked to provide emergency cover for a colleague at short notice and the consultant has previously arranged private commitments at the same time, the consultant should only agree to do so if those commitments would not prevent him or her returning to the relevant NHS site at short notice to attend an emergency. If the consultant is unable to provide cover at short notice it will be the employing organisation's responsibility to make alternative arrangements.

## **Use of NHS facilities and staff**

12. Except with the employing organisation's prior agreement, a consultant may not use NHS facilities or NHS staff for the provision of Private Professional Services or Fee Paying Services for other organisations.
13. The employing organisation has discretion to allow the use of its facilities and will make it clear which facilities a consultant is permitted to use for private purposes and to what extent.
14. Should a consultant, with the employing organisation's permission, undertake Private Professional Services or Fee Paying Services in any of the employing organisation's facilities, the consultant should observe the relevant provisions in the 'Code of Conduct for Private Practice'.
15. Where a patient pays privately for a procedure that takes place in the employing organisation's facilities, that procedure should take place at a time that does not impact on normal services for NHS patients. Except in emergencies, such procedures should occur only where the patient has given a signed undertaking to pay any charges (or an undertaking has been given on the patient's behalf) in accordance with the employing organisation's procedures.
16. Private patients should normally be seen separately from scheduled NHS patients. Only in unforeseen and clinically justified circumstances should a consultant cancel or delay a NHS patient's treatment to make way for his or her private patient.
17. Where the employing organisation agrees that NHS staff may assist a consultant in providing Private Professional Services, or provide private services on the consultant's behalf, it is the consultant's responsibility to ensure that these staff are aware that the patient has private status.
18. The consultant has an obligation to ensure, in accordance with the employing organisation's procedures, that any patient whom the consultant admits to the employing organisation's facilities is identified as private and that the responsible manager is aware of that patient's status.
19. The consultant will comply with the employing organisation's policies and procedures for private practice.

## **Patient enquiries about private treatment**

20. Where, in the course of his or her duties, a consultant is approached by a patient and asked about the provision of Private Professional Services, the consultant may provide only such standard advice as has been agreed with the employing organisation for such circumstances.
21. The consultant will not during the course of his or her Programmed Activities make arrangements to provide Private Professional Services, nor ask any other member of staff to make such arrangements on his or her behalf, unless the patient is to be treated as a private patient of the employing organisation.
22. In the course of his/her Programmed Activities, a consultant should not initiate discussions about providing Private Professional Services for NHS patients, nor should the consultant ask other staff to initiate such discussions on his or her behalf.

23. Where a NHS patient seeks information about the availability, or waiting times, for NHS services and/or Private Professional Services, the consultant is responsible for ensuring that any information he or she provides, or arranges for other staff to provide on his or her behalf is accurate and up-to-date.

**Promoting improved patient access to NHS care**

24. Subject to clinical considerations, the consultant is expected to contribute as fully as possible to reducing waiting times and improving access and choice for NHS patients. This should include ensuring that patients are given the opportunity to be treated by other NHS colleagues or by other providers where this will reduce their waiting time and facilitating the transfer of such patients.

**Increasing NHS capacity**

25. The consultant will make all reasonable efforts to support initiatives to increase NHS capacity, including appointment of additional medical staff and changes to ways of working.

### Mediation and appeals framework

Where a clinical academic who are employed in the NHS consultant grade via an honorary contract disputes a decision that they have not met the required criteria for pay the following mediation and appeals procedures are available.

#### Mediation

1. The clinical academic may refer the matter to the Head of School (or their nominee) who will consult with the NHS Medical Director. If the Head of School (or their nominee) or Medical Director is one of the parties to the initial decision, the referral will be to the Faculty Pro-Vice-Chancellor. Where a clinical academic holds an honorary contract with more than one NHS organisation, a designated honorary employer will take the lead. The purpose of the referral will be to reach agreement if at all possible.
2. The process will be that:
  - the clinical academic or either clinical or academic manager makes the referral in writing within two weeks of the disagreement arising
  - the party making the referral will set out the nature of the disagreement and his or her position or view on the matter
  - where the referral is made by the clinical academic, the managers responsible for making the recommendation as to whether the criteria for pay progression have been met, will set out the employing organisations' agreed position or view on the matter
  - where the referral is made by either the University manager or the clinical manager, the clinical academic will be invited to set out their position or view on the matter
  - the Head of School (or their nominee) working with the Medical Director (or appropriate other person) will convene a meeting, normally within four weeks of receipt of the referral, with the clinical academic and the responsible managers to discuss the disagreement and to hear their views
  - if agreement is not reached at this meeting, Head of School (or their nominee), in consultation with the Medical Director (or appropriate other person) will make a recommendation to the Vice Chancellor (or their nominee), copied to the Chief Executive of the (lead) NHS Trust or other NHS body holding the clinical academic's honorary contract, and inform the clinical academic and the responsible managers of that decision or recommendation in writing
  - in the case of a decision on whether the criteria for pay progression have been met, the Vice-Chancellor (or their nominee) will inform the clinical academic, Head of School (or their nominee) and Medical Director (or appropriate other person) and the responsible managers of their decision in writing
  - if the clinical academic is not satisfied with the outcome, they may lodge a formal appeal as outlined below.

#### Formal appeal

3. A formal appeal panel will be convened only where it has not been possible to resolve the disagreement using the mediation process. A formal appeal will be heard by a panel under the procedure set out below.
  4. An appeal shall be lodged in writing with the Vice-Chancellor, copied to the NHS Chief Executive<sup>2</sup>, as soon as possible, and, in any event, within two weeks of the outcome of the mediation process. The appeal should set out the points in dispute and the reasons for the
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appeal. The Vice-Chancellor, in consultation with the NHS Chief Executive, will, on receipt of a written appeal, convene an appeal panel to meet within four weeks of receipt of a written appeal. The Vice-Chancellor may delegate operational procedures, as appropriate, but they retain overall responsibility for the appeal.

5. The membership of the panel will be:
  - i) a chair nominated by the University
  - ii) a representative nominated by the honorary employer
  - iii) a representative nominated by the clinical academic
  - iv) a member chosen by the University from the list of individuals approved by NHS England (or its replacement equivalent body) and the BMA – this list is also be used for job planning appeals for NHS consultants. The list will also include a number of clinical academics and other University employees nominated by the University. NHS England will monitor the way in which individuals are allocated to appeal panels to avoid particular individuals being routinely called upon. If there is an objection raised to the first representative from the list, one alternative representative will be chosen. The list of individuals will be regularly reviewed.
  - v) a member chosen by the clinical academic from the list described at sub-paragraph iv) above of individuals approved by the NHS England and the BMA. The process will be identical to that described at sub-paragraph iv) above and if an objection is raised one alternative representative will be chosen.
6. No member of the panel should have previously been involved in the dispute.
7. The parties to the dispute will submit their written statements of case to the appeal panel and to the other party one week before the appeal hearing. The appeal panel will hear oral submissions on the day of the hearing. The employers will jointly present their case first explaining the agreed position on the integrated Job Plan, or the reasons for deciding that the criteria for a pay threshold have not been met.
8. The clinical academic may present their own case, or be assisted by a work colleague or trade union or professional organisation representative who is not a member of the appeals panel. Legal representatives acting in a professional capacity are not permitted.
9. Where any party or the panel requires it, the appeals panel may hear expert advice on matters specific to a specialty.
10. It is expected that the appeal hearing will last no more than one day.
11. The appeal panel will make a recommendation on the matter in dispute in writing to the Vice-Chancellor (or their nominee), copied to the Board of the honorary employing organisation, normally within two weeks of the appeal having been heard and this will normally be accepted. The clinical academic should see a copy of the recommendation when it is sent to the Vice-Chancellor. The Vice-Chancellor (or their nominee) will make the final decision and inform all the parties in writing.
12. Any decision that affects the salary or pay of the clinical academic will have effect from the date on which the clinical academic referred the matter to mediation or from the time they would otherwise have received a change in salary, if earlier, or as determined by the appeals process.
13. The appeals process set out in this Appendix applies only to pay progression. No further right of appeal through the University's procedures exists.

## Pay progression review meeting record

It is important that both the staff member and the line manager complete the pay progression meeting between six and three months from the increment date and forward the completed record to the School administration team responsible for administering the approvals process (in the School of Medicine, this is MS-People-Services).

| Section 1. Personal details (to be completed by the staff member) |  |                                  |
|-------------------------------------------------------------------|--|----------------------------------|
| Full name                                                         |  |                                  |
| School:                                                           |  |                                  |
| Unit/platform/department                                          |  |                                  |
| Job title                                                         |  |                                  |
| Academic line manager                                             |  |                                  |
| Clinical line manager                                             |  |                                  |
| Date of pay progression meeting                                   |  |                                  |
| Date pay progression due                                          |  |                                  |
| Date of last appraisal                                            |  | Within last 12 months?<br>Yes/No |
| Date of last submitted job plan                                   |  | Within last 12 months?<br>Yes/No |

| Section 2. Pay progression criteria checklist (to be completed in the meeting)                                                                                                                                                                |     |                                                                   |                                                   |         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-------------------------------------------------------------------|---------------------------------------------------|---------|
|                                                                                                                                                                                                                                               | Met | Not met for reasons beyond the senior clinical academic's control | Met subject to the achievement of remedial action | Not met |
| Made every reasonable effort to meet the time and service commitments in the Job Plan                                                                                                                                                         |     |                                                                   |                                                   |         |
| Participated satisfactorily in the appraisal process                                                                                                                                                                                          |     |                                                                   |                                                   |         |
| Participated satisfactorily in reviewing the Job Plan and the setting of personal objectives (including any service and quality improvements, or teaching and training) that may have been agreed as personal objectives.                     |     |                                                                   |                                                   |         |
| Met the personal objectives in the Job Plan, or where this is not achieved for reasons beyond the consultant's control, made every reasonable effort to do so (where none-set, mark as "Not met for reasons beyond the consultant's control") |     |                                                                   |                                                   |         |
| Worked towards any changes agreed in the last Job Plan review as being necessary to support the achievement of the employing organisation's objectives                                                                                        |     |                                                                   |                                                   |         |

|                                                                                                                                                                                         |                   |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--|--|--|
| Taken up any offer to undertake additional Programmed Activities that the employing organisation has made to the consultant in accordance with Schedule 6 of these Terms and Conditions | As the University |  |  |  |
| Met the standards of conduct governing the relationship between private practice and NHS commitments set out in national T&C Schedule 9                                                 |                   |  |  |  |
| Engaged and participated with statutory and mandatory training or where this is not achieved for reasons beyond the doctors' control, made every reasonable effort to do so             |                   |  |  |  |

**Outcome 1 – All criteria have either been met or not met due to reasons beyond the senior clinical academic's control (columns 1 and 2 of the Pay Progression Criteria Checklist)**

|                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Senior Clinical Academic's reflection</b>                                                                                             |
| <br><br><br><br><br>                                                                                                                     |
| <b>Line Manager's reflection</b>                                                                                                         |
| <br><br><br><br><br>                                                                                                                     |
| <b>Where the criteria were not met owing to reasons beyond the senior clinical academic's control, please describe the circumstances</b> |
| <br><br><br><br><br>                                                                                                                     |
| <b>Move onto Section 3</b>                                                                                                               |

**Outcome 2 – Pay progression criteria have been met subject to the achievement of remedial action.**

One or more of the criteria have been met subject to the achievement of remedial action. All remaining criteria have been met or not met due to reasons beyond the consultant's control (columns 1, 2 & 3 of the Pay Progression Criteria Checklist)

|                                                               |
|---------------------------------------------------------------|
| <b>Agreed remedial action(s)</b>                              |
| 1.<br><br>2.<br><br>3.                                        |
| <b>Remedial action deadline</b>                               |
| Date: .....                                                   |
| <b>Remedial Action Review. Date: .....</b>                    |
| 1. Met/ Not Met<br><br>2. Met/ Not Met<br><br>3. Met/ Not Met |
| <b>Senior Clinical Academic's reflection</b>                  |
| <br><br><br>                                                  |
| <b>Line Manager's reflection</b>                              |
| <br><br><br>                                                  |
| <b>Move onto Section 3</b>                                    |

### **Outcome 3 – Pay progression criteria have not been met or remedial action has not been completed.**

One or more of the criteria have not been met (column 4 of the Pay Progression Criteria Checklist)

The senior clinical academic will remain on their current pay point on the New Consultant Pay Scale, but will be eligible for pay progression if they meet the criteria at their next increment date (ie no later than 12 months after they were first eligible for pay progression).

Line manager and senior clinical academic to agree an action plan and timescales on how the criteria will need to be met before the next incremental date.

|                                                                                                         |
|---------------------------------------------------------------------------------------------------------|
| <b>Agreed action(s)</b>                                                                                 |
| 1.<br><br>2.<br><br>3.                                                                                  |
| <b>Next increment date</b> (no later than 12 months after they were first eligible for pay progression) |
| <b>Date:</b> .....                                                                                      |
| <b>Senior Clinical Academic's reflection</b>                                                            |
| <br><br><br><br><br><br><br><br><br><br>                                                                |
| <b>Line Manager's reflection</b>                                                                        |
| <br><br><br><br><br><br><br><br><br><br>                                                                |
| <b>Move onto Section 3</b>                                                                              |

### Section 3. To be completed by the Line Manager and Staff Member

#### Select one outcome

##### Outcome 1:

We confirm that the criteria for pay progression have been met, or not met due to reasons outside the staff member's control.

We acknowledge that the final outcome for pay progression will be confirmed on receipt of confirmation of eligibility a) from the NHS organisation in which the staff member holds an Honorary NHS Contract and b) from HR that there are no active disciplinary sanctions or ongoing capability processes.

Staff Member: \_\_\_\_\_ (signature) Date: \_\_\_\_\_

Line Manager: \_\_\_\_\_ (signature) Date: \_\_\_\_\_

Print name: \_\_\_\_\_

##### Outcome 2:

We confirm that the criteria for pay progression have been met following remedial action, or not met due to reasons outside the staff member's control

We acknowledge that the final outcome for pay progression will be confirmed on receipt of confirmation of eligibility a) from the NHS organisation in which the staff member holds an Honorary NHS Contract and b) from HR that there are no active disciplinary sanctions or ongoing capability processes.

Staff Member: \_\_\_\_\_ (signature) Date: \_\_\_\_\_

Line Manager: \_\_\_\_\_ (signature) Date: \_\_\_\_\_

Print name: \_\_\_\_\_

##### Outcome 3:

We confirm that the criteria for pay progression have not been met.

A review meeting will be scheduled six months prior to the next increment date (no longer than 12 months from the initial increment date) to review if the action plan has been met. A new pay progression form will be completed at that time.

Staff Member: \_\_\_\_\_ (signature) Date: \_\_\_\_\_

Line Manager: \_\_\_\_\_ (signature) Date: \_\_\_\_\_

Print name: \_\_\_\_\_

**Section 4. To be completed by the Head of School's nominee**

|                                                                     | Yes | No |
|---------------------------------------------------------------------|-----|----|
| HR confirm eligible for pay progression                             |     |    |
| HR confirm no disciplinary sanctions active on the doctor's record. |     |    |
| HR confirm no formal capability processes ongoing                   |     |    |

**Outcome 1 or 2:**

I confirm that the criteria for pay progression have been met, or not met due to reasons outside the staff member's control

Head of School's Nominee: \_\_\_\_\_ (signature) Date: \_\_\_\_\_

Print name: \_\_\_\_\_

**Head of School's Nominee to inform School administrator responsible for actioning pay progression****Outcome 3:**

I confirm that the criteria for pay progression have not been met.

Head of School's Nominee: \_\_\_\_\_ (signature) Date: \_\_\_\_\_

Print name: \_\_\_\_\_

**Head of School's Nominee to refer to HRBP for FPVC review**

Version control: 1

Date: April 2025

Review date: April 2027

Owner: University of Nottingham HR