

21 October 2015

Rt Hon. Jeremy Hunt MP Secretary of State for Health Department of Health 79 Whitehall London SW1A 2NS

Dear Secretary of State,

## Impact of changes to the junior doctors' contract on clinician scientists

Over the past decade, funders including the NIHR, the Wellcome Trust, the MRC, CRUK, the BHF and bodies such as the Academy of Medical Sciences and the Medical Schools Council, have invested heavily in nurturing the next generation of clinician scientists. Future advances in the health of the nation and the UK's global competitiveness in medical research depend on being able to recruit and retain these highly skilled individuals who are in high demand internationally.

Clinician scientists represent a small, but critical, subgroup of the medical workforce. They play a crucial role in the interdisciplinary effort that leads to new discoveries and are the link between laboratory science and improved patient care. However, this career pathway is lengthy (training over at least 10 years) and very challenging because of the need to undertake research training alongside the already demanding pressures of clinical training and service provision. We would therefore be deeply concerned if contractual changes were introduced that could adversely affect the recruitment of talented medical trainees to this career pathway.

The current NHS Mandate between the government and NHS England sets out clearly the NHS responsibility to promote research and innovation to improve patient outcomes and you have helpfully, in your published letter to junior doctors, confirmed that academic trainees would not be disadvantaged by the new contract under discussion. It is our unanimous view that salaries for clinical academics should not be dependent on a case-by-case analysis of the research undertaken this would not only be impracticable but potentially highly subjective and would risk introducing a significant disincentive for aspiring clinician scientists.

Clinician scientists already undergo rigorous external peer review to secure fellowship funding. We would urge that full pay parity is agreed automatically for academic trainees who are in receipt of peer reviewed, competitively awarded research grants or educational scholarships equal to trainees on non-academic training pathways. This is essential to ensure equal recognition for the diverse professional workforce needed to support our nation's health and wealth in the 21<sup>st</sup> century.

A pragmatic approach to ensuring that junior doctors undertaking research training do not lose out financially would be to ensure that such doctors are never "out of programme". Instead we suggest that research training competitively awarded by UK funders should be incorporated as an integral part of postgraduate training and Annual Reviews of Competence Progression, in keeping with the Shape of Training (Greenaway) recommendations.

The UK must at all costs avoid turning off the tap of talent upon which future advances in the health of the nation depend. We should welcome the opportunity to work with you to develop a way forward that will support these key members of the NHS workforce.

Yours sincerely,

Professor Sir John Tooke

President, Academy of Medical Sciences

Dr Harpal Kumar

Chief Executive, Cancer Research UK

Professor Sir John Bell

Independent Chair, Office for Strategic

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Dr Jeremy Farrar Director, Wellcome Trust