Contract of Employment for
Non-Consultant Hospital Doctors
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Preamble

This document is comprised of the following:

a) Terms and Conditions;

b) Appendices;

This contract takes precedence over any inconsistent provision in previously agreed documents regulating the terms and conditions of employment of Non-Consultant Hospital Doctors. Where there is any conflict between any provision of the contract document and any prior instrument, the provision in this contract document should prevail.

For the purposes of this contract, the term Non-Consultant Hospital Doctor (NCHD) refers to persons employed in the public health service in Ireland as Interns, Senior House Officers, Registrars, Senior Registrars, Specialist Registrars or otherwise for the purpose of providing medical or dental services and/or the pursuance of medical or dental training who for the purposes of such employment are not employed as Consultants.
1. Purpose and Commencement Date

a) This is a contract of employment between ____________ (name and address of Employer) and _______________ (name and address of employee). _____________ (Name of employee) is appointed to the post of a _________________ (state grade and specialty) with effect from the _______________ (insert date). The Contract is (delete as appropriate):
   i) for a fixed term / purpose as follows:____________________;

   Should the contract be for a fixed term, the Unfair Dismissals Act, 1977 – 2001 shall not apply to the NCHD’s dismissal consisting only of the expiry of the contract on the specified date. The NCHD’s employment may be terminated by notice in accordance with the Minimum Notice and Terms of Employment Act 1973 – 2001: or

   ii) of indefinite duration.

b) A candidate for and any person holding the office must be in a state of health such as would indicate a reasonable prospect of ability to render regular and efficient service.

c) Should the contract be for a fixed term / purpose it will generally commence on the second Monday of January or the second Monday of July. This provision shall come into effect from 1st July 2010.

2. Registration Status and Designation of Post

a) Once the NCHD has commenced employment, continued employment in this post is contingent on (delete as appropriate):

   i) the NCHD being registered in accordance with the Medical Practitioners Act 2007 with the Register of Medical Practitioners maintained by the Medical Council of Ireland and maintaining his/her professional competence on an on-going basis pursuant to any Medical Council professional competence scheme applicable to the NCHD as a medical practitioner registered by the Medical Council of Ireland; or

   ii) in relation to a post designated as a Non-Training Post, the NCHD being registered in accordance with the Medical Practitioners Act 2007 on the General Division of the Register of Medical Practitioners maintained by the Medical Council of Ireland maintaining his/her professional competence on an on-going basis pursuant to any Medical Council professional competence scheme applicable to the NCHD as a medical practitioner registered by the Medical Council of Ireland; or

   iii) in relation to a post designated as a Training Post (including Intern posts), the NCHD being registered on the Specialist Trainee Division of the Register of Medical Practitioners maintained by the Medical Council of Ireland and participating as required in a programme of Intern training recognised by the Medical Council of Ireland or in a programme of specialist training under the auspices of a postgraduate medical training body recognised by the Medical Council of Ireland.

3. Reporting Relationship

The NCHD’s reporting relationship is to the Employer via his/her supervisory Consultant and Clinical Director (if such is in place). The NCHD may be required to report to the designated supervisory Consultant / Clinical Director / Head of Academic Department on matters relating to medical education, training and research. The NCHD will report directly to the Employer as required.

4. Location and Residence

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1 Hereafter referred to as ‘The NCHD’
a) The NCHD’s appointment shall be to _______________ (name of HSE area / HSE funded Hospital / Agency). The NCHD’s employment location(s) is ________________.

b) The NCHD’s employment location may be changed within the functional area and service range applicable to his/her Employer. Due consideration will be given to the registration status of the NCHD with the Medical Council of Ireland should a change in location be required.

c) In circumstances where a change of location is required, (e.g. - hospital closures or major changes taking place in the character of the work being carried out there) the NCHD will be offered an alternative appointment in an appropriate discipline. In the first instance this will be within the (Hospital Network Area / HSE funded Hospital / Agency). The NCHD shall be consulted should (s)he be required to change to an employment location outside the (Hospital Network Area / HSE-funded Hospital / Agency). Subject to the provisions of the removal expenses scheme for the Health Service Executive, removal expenses shall be payable, if claimed.

5. Hours of Work

a) The NCHD is contracted to undertake such duties / provide such services as are set out in this Contract in the manner specified for 39 hours per week. The 39 hours are as determined by the roster and include a paid lunch break.

b) The NCHD is required to deliver these hours on any 5 days out of the 7 in a week as determined by the Employer.

c) For the avoidance of doubt, the provisions of Section 5 a) and b) above are subject to amendment in accordance with Clause 2.3 of the agreement made between the Health Service Executive and the Irish Medical Organisation on the 22nd day of January 2010.

d) When rostered to attend on any day Monday to Friday, the NCHD must work a minimum shift of 6 hours. When rostered to attend on Saturday or Sunday, the NCHD must work a minimum shift of 5 hours.

e) The NCHD shall not be required to work for more than 24 consecutive hours on-site.

f) The Employer will ensure that the NCHD is rostered to work on-site for a period of 24 hours on no more than a 1 in 5 basis other than in exceptional circumstances.

g) Rosters must provide for a handover period between each shift. Handover periods must be of at least 30 minutes in duration.

h) The NCHD may not be rostered to work a split shift. The NCHD may be required to:
   i) provide overtime services (on-call on-site services) on-site in addition to the 39 hours.
   ii) provide on-call off-site services outside core and/or overtime hours as determined by the Clinical Director / Employer;
   iii) work beyond his/her rostered period in line with the exigencies of the service. The Employer will endeavour to ensure that this will be an exceptional rather than a standard requirement.

j) A minimum notice period of 2 weeks will apply for provision of initial rosters.

2 A split shift is an employment schedule where the employee’s normal work day is split in to 2 or more segments. For example an NCHD could not be rostered to work from 9 am to 2pm and then have a break until 8pm at which point they would be rostered to return to work until midnight.
k) The NCHD shall not be required to attend on-site on a rostered day off (including leave) outside the 2 week minimum notice period where the requirement for such attendance can be reasonably anticipated by the employer.

l) A minimum notice period will apply for changes to published rosters taking account of the need for shorter notice to respond to clinical need on an unplanned basis,

m) Where the NCHD is provided with more than one rostered day off during a week, the Employer should endeavour to ensure such days are consecutive.

n) The NCHD shall comply with such agreed arrangements as are put into place by the Employer for measurable and transparent systems of continuously monitoring adherence to working time legislation.

m) Work outside the confines of this contract is not permissible if the combined working time associated with this employment taken together with any other employment exceeds the maximum weekly working hours as set out in S.I. No. 494 of 2004 European Communities (Organisation of Working Time) (Activities of Doctors in Training) Regulations 2004.

6. Standard Duties and Responsibilities

a) The NCHD’s standard duties and responsibilities include, as directed by the Consultant / Clinical Director / Employer to, inter alia:

i) participate as a member of a multi-disciplinary team in the provision of medical care to patients;
ii) diagnose and treat patients;
iii) ensure that duties and functions are undertaken in a manner that prioritises the safety and well being of patients;

iv) assess patients on admission and/or discharge as required and write detailed reports in the case notes;
v) order and interpret diagnostic tests;
vi) initiate and monitor treatment;
vii) communicate effectively with patients and clients;
viii) further progress knowledge of diagnosis and management;
ix) participate in multidisciplinary clinical audit and proactive risk management and facilitate production of all data/information for same;
x) co-operate with such arrangements as are put into place to verify the delivery of all contractual commitments;
xi) co-operate with such measures as are necessary to ensure compliance with the requirements of the European Working Time Directive and related Irish legislation;
xii) co-operate with investigations, enquiries or audit relating to the provision of health services;
xiii) comply with statutory and regulatory requirements, agreed training principles where appropriate, corporate policies and procedures and human resource policies and procedures (e.g. Dignity at Work, Trust in Care, Flexible Working Scheme etc.);
xiv) attend at NCHD Induction. Induction training before the commencement of the employment relationship is not paid, while induction training during the currency of the employment relationship is paid;
xv) perform other duties as required by the supervising Consultant / Clinical Director / Employer.

b) Additional duties and responsibilities related to this post may be set out in the job description as issued by the Employer.

3 Training Principles to be incorporated into new working arrangements for doctors in training” published by the Medical Education and Training Group, July 2004
c) The NCHD is entitled during his/her employment to regular review of his/her performance - including MET/Research performance – by and together with the designated supervisory Consultant / Clinical Director / Head of Academic Department.

d) When carrying out these duties, the NCHD shall abide by the Irish Medical Council ‘Guide to Ethical Conduct and Behaviour’ (copy available directly from the Medical Council or at www.medicalcouncil.ie).

7. Locum cover

a) The NCHD will be expected to cover for occasional unplanned absence of colleagues.

b) Subject to a) above, in the event of the NCHD being absent, the Clinical Director / Employer will determine the requirement for locum cover and make necessary arrangements.

c) Management are obliged to operate this provision so as to ensure strict compliance with the requirements of the European Working Time Directive and related Irish legislation.

8. Medical Education and Training

a) For the purposes of NCHD education, training and the maintenance of NCHDs professional competence, the employer shall, in line with the requirements of the Medical Practitioners Act 2007, facilitate as appropriate the training / competence assurance requirements of NCHD posts.

b) For the purposes of education, training and the maintenance of professional competence, the NCHD shall, in line with the requirements of the Medical Practitioners Act 2007:

   i) participate in and satisfy the requirements of any programme of Intern training (s)he is registered on as defined by the Medical Council of Ireland; or

   ii) participate in and satisfy the requirements of any programme of specialist training (s)he is registered on as defined by the relevant postgraduate medical training body recognised by the Medical Council of Ireland; or

   iii) participate in and satisfy the requirements of any competence assurance programme (s)he is registered on as defined and delivered by the Medical Council of Ireland for that purpose.

c) The NCHD may, subject to the agreement of the Employer, make an explicit structured and scheduled commitment to educational activities in line with the educational and training requirements described at b) above. This will include paid non-clinical training days (or part of as appropriate)4 as required by the relevant programme of specialist training / competence assurance. Such structured and scheduled commitment and responsibility and accountability for same will be agreed in advance by the Employer with the relevant Training Body or University, will be consistent with the agreed training principles for postgraduate medical education and training5 and shall be incorporated into rosters.

9. Leave and Holidays

a) All requests for leave must be recommended by the supervising Consultant / Clinical Director and approved by the Employer prior to actual leave dates. Leave will be

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4 As of January 2010 these include paid non-clinical training days for Senior Registrars and Specialist Registrars – each of whom are entitled to the equivalent of one day per week with full pay for individual and specific research projects. It also applies to a range of trainees in Psychiatry and General Practice.

5 Training Principles to be incorporated into new working arrangements for doctors in training’, published by the Medical Education and Training Group, July 2004.
approved in line with agreed rota and service requirements, and notice is required in accordance with the Employer's policies.

b) Unplanned absence. The Employer is responsible for addressing any staffing requirement (if any) that arises from unplanned absence by the NCHD.

c) Annual leave
Annual leave is granted in accordance with the provisions of the Organisation of Working Time Act 1997. NCHDs are entitled to 16 calendar days leave per 6 month period. Calendar days are inclusive of weekends, hence if a doctor takes a full weeks annual leave, it equates to 7 calendar days. Payment of notional hours while on annual leave will be paid on the basis of average approved rostered hours over a reference period of 13 weeks.

The total hourly leave of an NCHD in a six month period is 93.6 hours. A single day's leave is calculated as being 7.8 hours, with a full weeks leave equating to 39 hours. The doctors leave for a 6 month period must not exceed the hourly total for the period.

An NCHD cannot be considered to have taken more than 39 hours leave in any one week.

d) Public holidays
Public holidays shall be granted in accordance with the Organisation of Working Time Act 1997. In respect of each public holiday the NCHD will receive one of the following (as the Employer may decide):

- An NCHD who normally works Monday – Friday and who has their public holidays off, is not entitled to an additional day off in lieu of the public holiday.

- An NCHD who is rostered for duty on the day on which a public holiday falls is entitled to single time extra remuneration in respect of hours worked on this day.

- NCHDs who work a ‘5 over 7’ roster are entitled to a total of 9 working days (7.8 hours per day) in lieu of the liability to be rostered on a public holiday. In terms of the practical implementation of this entitlement, 4 days fall due in respect of the period from the second Monday in January to the second Monday in July and 5 days apply in respect of the period from the second Monday in July to the second Monday in January.

e) Sick Leave
The NCHD shall comply with the Employer’s sick leave policy. The following points should be noted:

i) On the first day of illness, the NCHD should arrange to advise his/her supervising Consultant / Clinical Director and Medical Administration/Hospital Administration at the earliest possible time (where possible not later than 1 hour before starting time) of the absence from work. In the case of night duty, where possible notice should be given not later than 3.00 p.m. on the day in question. The supervisors should be advised of the reason(s) and the expected duration of the absence.

ii) If the absence exceeds two continuous days, a medical certificate must be submitted to the Employer on the third day. This certificate should specify the nature of the illness, the likely duration (but not exceeding one week) and should be signed by the NCHD’s General Practitioner or attending Consultant.

iii) The NCHD must give an indication of when he/she will be able to return to work as early as possible.

iv) The NCHD may be granted payment under the Sick Pay Scheme for absences due to illness or injury. Granting of sick pay is subject to compliance with the Employer’s sick leave policy.

v) To qualify for payment in respect of absence on sick leave, NCHDs must have completed 6 months service in the Irish public health service.
During the first 12 months of service, NCHDs may be granted up to 6 weeks basic pay (less appropriate Social Welfare mandate).

During the second and third years of service, NCHDs may be granted up to 12 weeks basic pay (less appropriate Social Welfare mandate).

On completion of 3 years service, NCHDs may be granted sick pay in accordance with the sick pay provisions covering other officer grades (less appropriate Social Welfare mandate).

f) Maternity Leave
   i) The Employer will give due regard to rostering of a pregnant NCHD who presents a medical certificate requiring a change in work pattern.

   ii) Pregnant NCHDs are entitled to the following benefits:
       1. 26 consecutive weeks maternity leave.
       2. Up to 16 weeks additional unpaid maternity leave.
       3. Time off work without loss of pay to attend ante natal and post natal appointments.
       5. Where the death of the mother occurs within 18 weeks of the birth, the balance of her leave is transferred to the father of the child.
       6. Protection of your job during maternity leave, additional maternity leave, fathers leave, health and safety leave and time off for ante natal and post natal care.
       7. The right not to be dismissed for any pregnancy related reason from the beginning of pregnancy until the end of maternity leave.

   iii) While on maternity leave, an NCHD will receive her normal basic pay and Living Out Allowance, less any amount attributable to overtime, night work or shift work, unsocial hours payments, or on call fees. NCHDs are entitled to maternity pay from their existing employer for a full 26 week period, including in circumstances where the contract expires prior to the end of their maternity leave.

   iv) Paid maternity leave will count as service in all respects e.g. for the purpose of annual leave, incremental credit etc. Maternity leave will not be treated as part of any other leave (including sick leave or annual leave) to which you are entitled. Full details are available in employee handbook.

g) Parental Leave
   Arrangements for the taking of parental leave will be in accordance with the provisions of the Parental Leave Act, 1998.

h) Adoptive Leave
   Arrangements for the taking of adoptive leave will be in accordance with the provisions of the Adoptive Leave Act, 1995 to 2005. An NCHD is entitled to 24 consecutive weeks’ (paid) adoptive leave and 16 consecutive weeks’ additional (unpaid) adoptive leave subject to compliance with the notification requirements.

i) Paternity Leave
   A male NCHD is entitled to three days special leave with pay on the birth of his child. This leave may be taken at the time of the birth or up to four weeks after the birth. Job-sharers and other NCHDs with flexible working arrangements are entitled to paternity leave on a pro rata basis. In the case of adoption, the leave may be taken on or up to four weeks after the date of placement of the child. In respect of stillbirths, which occur after the 24th week of pregnancy, fathers are entitled to paternity leave. In the cases where two or more children are born or two or more children are adopted, the entitlement to paternity leave will be three days for each child, e.g. where twins are born the father is entitled to six days paid leave.

j) Educational Leave
i) The Employer may, taking account of the NCHD’s medical education and training status, grant the NCHD up to a maximum of 18 working days (based on a 7.8 hour working day) per 6-month period to facilitate:

(1) Attendance at courses, conferences, and educational events determined to be appropriate by the HSE, the recognised postgraduate training bodies and the Universities;
(2) Study leave prior to an examination or repeat examination for higher degrees or diplomas determined to be appropriate by the HSE, the recognised postgraduate training bodies and the Universities;
(3) Attendance at examinations determined to be appropriate by the HSE, the recognised postgraduate training bodies and the Universities;
(4) Attendance at interviews within the Irish public health service appropriate to the NCHD’s training / career pathway;

ii) All educational leave must:

(1) be relevant,
(2) take account of service and rota needs,
(3) be recommended by the supervising Consultant / Clinical Director and
(4) be approved by the Employer in advance in line with the Employer’s leave policy and with cognisance of the requirements of any specialist training / professional competence scheme the NCHD is participating in and related medical education and training requirements.

k) Other types of leave
Details regarding paid and unpaid, Force Majeure, Trade Union, Compassionate and other leave can be obtained from the Employer. The particular arrangements applying to NCHDs in respect of Maternity leave are outlined in the Employer’s Terms & Conditions of Employment documentation.

l) Other HR policies
All other generally applicable human resource policies, e.g., Flexible Working, Trust in Care, Dignity at Work, etc. shall apply to the NCHD.

10. Salary

a) The salary scale for this post is __________. The starting point is €_____ (the current salary scale is attached as Appendix I). The NCHD’s salary is paid monthly/fortnightly by Credit Transfer (state frequency of payment).

b) A shift premium of T1/6 is payable to NCHDs working in Emergency Departments in respect of participation in a continuous rotating shift which requires delivery of the core 39 hours over a 24 hour, 7-day week cycle. Normal overtime arrangements apply after 39 hours.

c) This salary is fully inclusive of payment for all duties which the NCHD may be required to perform within the average 39 hours worked each week apart from other fees payable by the Department of Social and Family Affairs and/or other State Agencies on the basis of custom and practice. The salary includes rostered lunch breaks.

d) This salary will be revised in accordance with relevant provisions of the National Pay Agreements or other national agreements.

e) Statutory deductions in relation to PAYE and PRSI will be made from the NCHD’s remuneration.

f) The NCHD shall not demand or accept payment from any person in respect of the personal provision of professional medical/dental services. The NCHD may engage in professional medical/dental practice exclusively for an Employer(s) and on behalf of the
Mental Health Commission, the Coroner, other Irish statutory bodies\(^6\) and medical/dental education and training bodies recognised by the Medical Council of Ireland.

11. **Unsocial hours / premium payments**

NCHDs, in line with all other health service staff, are paid at single time extra for normal rostered hours during Sunday or a Public Holiday, i.e. for every hour that the NCHD works on a Sunday or Public Holiday (s)he will receive one extra hours pay.

12. **Overtime payments**

a) Overtime refers to work on-call on-site as required by the Employer in excess of the average 39 hours worked in each week of the roster period.

b) All hours worked in excess of the averaged 39 hours each week are liable for payment at time and a half.

c) Where the NCHD is rostered to work in excess of 39 hours in any week as part of a roster covering a number of weeks, payment may be calculated in such a manner as to provide for payment of:

   i) no more than 39 hours for each week worked during the roster period at the standard hourly rate;
   
   ii) all additional hours\(^7\) in excess of i) above at the rate of time and a half.

d) All overtime hours worked on a Sunday or public holiday are paid the rate of single time extra.

e) Unrostered overtime approved by the relevant Consultant / Clinical Director will be paid to the NCHD. The Employer may query such unrostered overtime or approval of same. Should a query be made, the NCHD will be notified of same. Payment will be made subsequent to any queries regarding such unrostered overtime being resolved.

13. **On-call off-site**

a) On-call off-site is defined as a period when the NCHD, is scheduled for a designated period to be off-site but available for emergency work. The NCHD providing on-call off-site makes a specific commitment to be readily available to attend or be in attendance at the employment locations specified during the on-call period.

b) The NCHD provides on-call off-site on a rostered basis.

c) On-call off-site is paid at the rate of time and 1/4 for the first 10 hours and the rate of 1/2 time thereafter. Additionally, NCHDs who are rostered for on-call off-site on a Sunday are paid at the rate of 0.75 time for those on-call from home and frequently called upon and 0.6 time for those on-call from home and infrequently called upon.

d) Once called and required to attend on-site, NCHDs are paid the normal overtime rate set out a Section 12 above.

e) The employer will pay the cost of landline telephone installation and rental to those NCHDs rostered off-site on-call.

14. **Living Out Allowance**

\(^6\) An indicative list of such bodies is available from the HSE Employers Agency, 63-64 Adelaide Road, Dublin 2, tel: 01 6626966, web: www.hseea.ie

\(^7\) This includes hours worked in excess of 39 hours for each week worked during the roster period which in themselves exceed 48 hours in any one week.
The NCHD shall receive a Living Out allowance where the employer does not provide adequate free accommodation in accordance with the relevant Department of Health and Children salary scales.

15. Training Supports

a) NCHDs are free to select particular structured specialised training programmes, opportunities or courses and make application to participate in same.

b) Individual NCHDs working within the public health service who are registered on and participate in structured specialised training programmes as defined by the relevant postgraduate medical training body recognised by the Medical Council of Ireland will not be required to make a financial contribution towards the cost of delivery of such programmes as they are defined in the contractual arrangements.

c) Individual NCHDs working within the public health service and who are registered on and participating in structured professional competence schemes, pursuant to the intended introduction of such schemes under the provisions of the Medical Practitioners Act 2007, will not be required to make a financial contribution towards the cost of delivery of such schemes as they are defined in the contractual arrangements.

d) Pending the introduction of such arrangements by the HSE in line with the structure of the academic year, the HSE / Employer up to the 30th June 2010 will refund costs incurred by the NCHD:

i) arising from continued registration and participation in programmes of specialist training delivered under the auspices of the relevant postgraduate medical training body recognised by the Medical Council of Ireland;
ii) previously claimable under the Postgraduate Medical and Dental Grant; and
iii) in respect of courses, examinations and attendance at clinical meetings – including travel - that have been accredited by the relevant postgraduate training body as being appropriate to the professional development of the NCHD.

Such costs must be vouched and refunds will be subject to the same controls as currently in operation.

e) NCHDs will also benefit from the purchase and commissioning by the HSE / employer of generic patient safety, mandatory training and skill courses, including, for example ACLS and infection control.

16. Allowances and payments to General Practice Registrars

a) General Practice Registrars shall receive an allowance of €11,428 per annum in respect of out of hours work and a payment of €3,809 per annum in respect of travelling expenses incurred while attending patients. General Practice Registrars are also entitled to travelling expenses in respect of attendance at training.

b) In accordance with the provisions of Labour Court Recommendation 19337, the HSE will reimburse General Practice Registrars who are required to provide their own transport for the carrying out of their duties, in respect of any additional loading over the normal cost of comprehensive insurance cover for such individual, that may be imposed specifically arising from the requirement to provide indemnification to the HSE as part of their insurance policy. Any such additional cost must be verified by the insurance provider.

17. Incremental Credit

a) Incremental credit is granted to the NCHD in respect of:

i) previous employment as an NCHD in Ireland.
ii) time spent gaining an B.Sc degree in an appropriate specialty (Pathology, Anatomy, Physiology),

iii) time spent gaining a postgraduate qualification provided that during such time (s)he was actively engaged in hospital work,

iv) time spent working as a junior lecturer in anatomy,

v) time spent as a University Demonstrator between the completion of internship and appointment to a non-consultant medical post will be regarded as being equivalent to hospital experience for the purpose of determining an NCHD’s entry point to the scale and his / her eligibility for appointment to registrar grade.

b) In relation to the appointment of a doctor to the post of registrar, he /she should have at least 24 months post qualification experience before being eligible for such an appointment.

c) An NCHD who takes up appointment as a Senior House Officer having previously held a Registrar post will be placed on the equivalent point of the SHO salary scale.

d) Periods spent in vocational training schemes for general practice are reckonable for incremental credit.

e) Locum NCHDs shall be granted incremental credit on the basis of previous recognised hospital experience.

f) An NCHD who was employed in foreign countries prior to taking up appointment in this country may be granted incremental credit where the experience was obtained in a recognised teaching hospital. Satisfactory evidence of same must be provided by the NCHD.

g) Up to two years incremental credit shall be granted to Maxillo-facial trainees based on previous postgraduate dental experience.

h) Assimilation to the Specialist Registrar salary scale shall be on the basis of completed years of service as follows:

<table>
<thead>
<tr>
<th>Year</th>
<th>Specialist Registrar Point of Scale</th>
</tr>
</thead>
<tbody>
<tr>
<td>2(^{nd}) / 3(^{rd}) SHO</td>
<td>1(^{st}) Point</td>
</tr>
<tr>
<td>4(^{th}) SHO and 1(^{st}) Registrar</td>
<td>2(^{nd}) Point</td>
</tr>
<tr>
<td>2(^{nd}) Registrar</td>
<td>3(^{rd}) Point</td>
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<td>4(^{th}) Registrar</td>
<td>5(^{th}) Point</td>
</tr>
</tbody>
</table>

i) NCHDs appointed to posts of Senior Registrar who have been employed as Registrars for three years or more will be granted one increment for each year or part of a year employed in excess of the first three years. This shall be up to a maximum of three increments over and above the first point on the Senior Registrar scale.

j) Incremental credit is not granted to NCHDs in respect of:

i) Service as locum general practitioner,

ii) Service in a non-training post with the Irish Blood Transfusion Service.

18. Travelling expenses for attendance at interview

The NCHD shall be paid travelling expenses for attendance at interviews within the Irish public health service at public service rates.
19. Relocation expenses

a) All NCHDs on approved rotation schemes are entitled to claim relocation expenses within the state once per annum subject to a maximum payment of €500 in any case and such costs being vouched.

b) The following expenses are covered:

i) Removal expenses of an NCHDs furniture and effects from the old to the new house;

ii) Local short-term storage (up to 3 months) when required due to housing difficulties;

iii) Cost of insuring (i) and (ii) above at normal insurance rates;

iv) The cost of one journey for the NCHD (and dependants) at appropriate public service rates;

v) Expenses incurred in lease of principal residence when the NCHD is the owner / occupier.

Original receipts must accompany any claims made.

20. Superannuation

On commencing employment, the NCHD will become a member of the HSE/VHSS/NHSS Superannuation Scheme (delete as appropriate). A copy of the Superannuation Code is available from the relevant HR Department and a statement of benefits will be provided on request. NCHDs are covered by the provisions of the Public Service Superannuation Miscellaneous Provisions Act 2004.

21. Disciplinary / Grievance Procedures

A copy of the Employer’s Disciplinary and Grievance Procedures will be issued to the NCHD upon his/her commencement of employment. The NCHD shall comply with these procedures.

22. Policies and Procedures

The extent to which the Employer’s Policies and Procedures pertain to NCHDs is as outlined in the Employer’s Terms and Conditions of Employment booklet.

23. Confidentiality

In the course of the NCHD’s employment he/she may have access to, or hear information concerning the medical or personal affairs of patients and / or staff. Such records and information are strictly confidential and in whatever format and wherever kept, must be safeguarded.

24. Records and Property

a) The NCHD should take all reasonable measures to ensure that records, while in his/her possession, are stored in such a manner that ensures confidentiality, security and ready accessibility for clinical staff when required for patient management.

b) The NCHD shall not remove from the work setting any records in any format, electronic or otherwise, belonging to the Employer / Health Service Executive (HSE) at any time without having authorisation. Such authorisation will be issued in advance of the first instance and apply thereafter.

c) The NCHD will return to the Employer / HSE upon request, and, in any event, upon the termination of his/her employment, all records and property and equipment belonging to the Employer / HSE which are in his/her possession or control.
25. Clinical Indemnity

a) The NCHD will be provided with an indemnity under the Clinical Indemnity Scheme (administered by the State Claims Agency – [www.stateclaims.ie](http://www.stateclaims.ie)) against the cost of meeting claims for personal injury arising out of bona fide actions taken in the course of his/her employment.

b) This indemnity is in addition to the Employer’s(s’) Public Liability / Professional Indemnity / Employer’s(s’) Liability in respect of the NCHD’s non-clinical duties arising under this contract.

c) [Name of Employer] strongly advises and encourages the NCHD to take out supplementary membership with a defence organisation or insurer of the NCHD’s choice, so that the NCHD has adequate cover for matters not covered by the HSE / employing agency, such as representation at disciplinary and fitness to practice hearings or Good Samaritan acts out of the jurisdiction of the Republic of Ireland.

d) For details of the scheme please refer to the scope of coverage document available from the State Claims Agency at [http://www.stateclaims.ie/](http://www.stateclaims.ie/)

26. Review

a) The terms and conditions of employment as set out in this contract will be reviewed in 2014 by the representatives of the Employers and the NCHDs.

b) A Contract Implementation Committee, comprising representatives of the Employers and the organisation(s) representing NCHDs will be established and meet semi-annually as required.

27. Acceptance of Contract

a) This Contract, the associated Terms and Conditions and terms expressly incorporated by reference or by statute contain the terms of the NCHD’s employment with [insert name of Employer].

b) The offer of this Contract by the Employer is subject to the NCHD accepting the offer within the term specified by the Employer and in any event within two weeks.

c) Either party may withdraw from the offer or acceptance of the offer not later than two weeks prior to date on which the term of employment is to commence.

d) The NCHD confirms his/her agreement to the following declaration by signing below:

i) I declare that I am not the subject of any investigation by a medical registration or licensing body or authority in any jurisdiction with regard to my medical practice or conduct as a practitioner. I have not been suspended from registration nor had my registration or licence cancelled or revoked by any medical registration or licensing body or authority in any jurisdiction in the last ten years nor am I the subject of any current suspension or any restrictions on practise. In addition, I confirm that I am not aware that I am the subject of any criminal investigation by the police in any jurisdiction.

ii) I am aware of the qualifications and particulars of this position and I hereby declare that all the particulars furnished by me are true. I hereby declare that to the best of my knowledge there is nothing that would adversely affect the position of trust in which I would be placed by virtue of this appointment.

iii) I understand that any false or misleading information submitted by me will render me liable to automatic disqualification or termination of employment if already employed. I understand that this appointment is subject to the receipt of appropriate registration
with the Medical Council, satisfactory references, Garda/Police Clearance and Occupational Health clearance.

iv) I have read and understood the Medical Council’s ‘Guide to Ethical Conduct and Behaviour’ and any other relevant guidance provided by the Medical Council in relation to ethical or professional conduct. I undertake to apply the Medical Council’s ethical and professional conduct guidance to the clinical and professional situations in which I may work.

v) I have read this document and I hereby accept the post of _____________ in accordance with the terms and conditions specified and I undertake to commence duty on ______________

Name (Block Capitals): _____________________________
Signature of NCHD: ___________________________ __
Initials used by NCHD: _____________________________
NCHD’s Medical Council Registration Number: _____________________________
Date: _____________________________
Employer (Block Capitals): _____________________________
Signature on behalf of Employer: _____________________________
Date: _____________________________

* To be included in the letter of offer sent to the NCHD before (s)he commences employment.
Appendix I – NCHDs basic salary and allowances as of 1 January 2010

Intern
1  €30,257
Senior House Officer
1  €38,839
2  €40,998
3  €44,224
4  €46,334
5  €50,578
6  €52,687
7  €54,746
Registrar
1  €50,578
2  €52,687
3  €54,746
4  €56,260
5  €58,279
6  €60,305
Senior Registrar
1  €65,347
2  €67,392
3  €69,440
4  €71,621
5  €74,139
6  €76,762
7  €79,468
Specialist Registrar
1  €60,404
2  €61,855
3  €63,953
4  €66,840
5  €69,915
6  €72,995
7  €76,062
Living out allowance  €55.08 per week
Sunday / Public Holidays
Single time extra for each hour worked
NCHDs (A&E)
Shift premium of T+1/6th where continuous rotating shift
over a 24 hour, 7 day week cycle applies
Overtime Rates
<table>
<thead>
<tr>
<th>Day</th>
<th>Overtime Payment</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday – Saturday</td>
<td>All overtime hours</td>
<td>T + 1/2</td>
</tr>
<tr>
<td>Sunday</td>
<td>All overtime hours</td>
<td>T x 2</td>
</tr>
<tr>
<td>Public Holidays</td>
<td>All overtime hours</td>
<td>T x 2</td>
</tr>
</tbody>
</table>

On off-site call rates
Half of all hours, up to a maximum of 10 hours spent on
call – T + ¼
Balance of Hours
½ 1/2 T

Additional payments are made to NCHDs who are rostered for on-call off site on Sunday for
the first eight hours as follows:
On call and frequently called upon  0.75 T
On call from home and infrequently called upon  0.6 T