Decision Document

Change to Resident Medical Officer Rotation Dates from 2021

(July 2020)



Prepared by:

Purpose

The purpose of this document is to set out the 20 District Health Boards (DHBs) Chief Executive decisions on the proposed changes to the Resident Medical Officer (RMO) rotation dates from the beginning of the 2021 training year.

The full submissions received by the DHBs will be made available on the TAS website shortly. Submissions made by individuals will be anonymised.

The DHBs are grateful to all the individuals and organisations who made submissions to the process.

Overview

The DHBs released a consultation document on 18 June to change Resident Medical Officer (RMO) rotation dates from the beginning of the 2021 training year. Feedback on the consultation document closed on 8 July and 55 responses were received from a wide range of stakeholders.

Feedback indicated that 71 percent of respondents are in favour of the change.

Who responded

Responses on the consultation proposal were received from:

- The Medical Council of New Zealand
- The NZ Medical Association (NZMA)
- The New Zealand Medical Students Association (NZMSA)
- The Ministry of Health
- The Council of Medical Colleges (CMC)
- The University of Auckland Faculty of Health Sciences
- The Society of Anaesthetists
- The following colleges:
 - The Royal Australian and New Zealand College of Psychiatrists
 - The Australasian College for Emergency Medicine
 - The Royal New Zealand College of General Practitioners
- 14 Trainee Interns / Medical Students
- 12 Resident Medical Officers (RMOs) *
- 9 senior medical professionals (SMOs, GPs etc)
- Specialty Trainees of New Zealand (STONZ)
- New Zealand Resident Medical Association (NZRDA)
- 8 DHB RMO Unit Coordinators**, Northern Regional Alliance (NRA) or CEOs

Note: these responses are in addition to the responses received prior to the consultation, primarily from the Colleges, which were shared in the consultation document.

* 3 submissions were received from RMOs that represented the views of more than person. (One response was on behalf of 9 RMOs, one for 30 and another for 14). Each of these was treated as one response and in all 3 responses the majority were in favour of the proposal. This was counted as 3 responses in favour of the proposal.

** The RMO Unit Managers put in a joint response, primarily focussed on the Transitional Options which was counted as one response. In addition, 4 RMO Unit Managers put in individual responses commenting on a range of questions. These were treated as 4 individual responses.

Summary of the Consultation Responses

Overall support for the Proposal

- 1. Of the 55 responses 39 responses i.e., 71 percent were in favour of the changing the rotation dates from the 2021 training year.
- 2. Those supporting the change proposal included the NZMA, the CMC, the University of Auckland Faculty of Health Sciences, the Society of Anaesthetists, the Royal Australian and New Zealand College of Psychiatrists, the Australasian College for Emergency Medicine, the Royal New Zealand College of General Practitioners, the majority Trainee Intern, RMO and senior medical professional responses and the CEs, NRA and RMO Unit managers and STONZ.
- 3. Three of the 39 supportive responses were conditional on some transitional issues being addressed. 2 responses supported a move of the training year but only if it was delayed for one year. Of the 3 responses that were conditional 2 had addressing the Trainee Intern financial issue as a requirement and 1 sought a transitional 5th rotation for House Officers as a mitigation to the 21-week Quarter 4 (see Transitional Issues below).
- 4. STONZ has supported the change proposal but their submission states that "the financial concerns for Trainee Interns must be addressed before proceeding with any change." STONZ have also highlighted a number of other transitional issues that they wished to see addressed which are outlined in Issues and Mitigations.
- 5. Ten responses were not supportive and the remaining 4 were unsure or neutral. Of the 10 responses that were not supportive 5 were from Trainee Interns.
- 6. The NZMSA stated that they could not support the proposed change without any confirmed financial assistance but noted that 89% of the current Trainee Intern respondents to a recent survey were largely accepting of the proposal but when they further elaborated it was on the basis of having financial support in some form.
- 7. The NZRDA noted that there was a diversity of opinion from their members, but overall the majority of their members who provided feedback were not in favour of shifting the dates. The NZRDA submission commented that the proposal lacked a compelling case for change based on evidence and there was a lack of clarity on the proposed mitigations. Further, that the short timeframe for the consultation had precluded exploration of other options and a consideration of the risks and benefits of these. They also noted that there was a breadth of opinion on the proposal and this was because of how the proposal would impact individuals differently.
- 8. The remaining 3 negative responses were from Registrars who were concerned about the impact of the change on their upcoming end-of-year arrangements for the next stage in their careers.

Suggested Amendments

- 9. Nineteen responses proposed some suggested changes to the proposed rotation dates for 2021. The issues for amendment of the proposal most frequently raised were:
 - a. Twelve respondents proposed having a two-week gap between House Officers (HOs) and Registrar start dates to allow new HOs to settle in, ensure patient care is not compromised by

large number of new medical staff entering the health system at one time and to better align with Australia start better i.e. start Registrars on 1 February in 2021.

- b. Respondent(s) also commented:
 - it would also allow more time for House officers to familiarise themselves with a service before registrars changed
 - o allow more time for administration associated with run changes.
 - That this overlap time is particularly important with the 10/4 rosters
 - that the UK moved from a system of all rotation changeovers on one day to a two- week separation and this had benefits for patient care.
 - having changeovers on a public holiday i.e. this would be the first day of the was undesirable (current proposal impacts Wellington region and two-week gap would impact all DHBs north of Taupo re anniversary dates)
 - \circ that an extended period of orientation would improve the transition of PGY1s to work
- c. Three respondents proposed that the decision for change could be delayed to 2022 year to allow more time for consideration and 3 proposed to delay the change to allow for Trainee Interns' adjustment. NZMSA commented that "the outlined key enduring benefits of the proposal would still be achieved, alongside a reduction of our primary concern of financial impact on graduating medical students, if this change was made at a later date and implemented in the following year in 2022."

Benefits

- 10. There was strong support for the benefits identified. Responses cited the desirability of a break for new graduates between study and starting work, the ability to take leave over Christmas/New Year, better availability of senior staff for supervision and the alignment between New Zealand and Australian dates allowing for better movement between countries and simplified administration.
- 11. Responders also noted that the majority of the benefits were enduring but a timely decision was required to maximise the realisation of the benefits. Some respondents also noted that the current uncertainty was creating stress for some of those impacted in the short term by this decision, in particular, the current cohort of Trainee Interns.
- 12. Other benefits outlined included:
 - Better for changing locations after school year finishes
 - o Better matches the start dates of other professions
 - Moving in December is detrimental to training
 - Provides more flexibility with the uncertainty around the borders which if loosened could result in UK graduates returning to UK
 - Patient safety related to the adequacy of supervision

- o Allows Trainee Interns to focus on finishing their studies not worrying about moving
- PGY1s would not enter hospital in a time of flux but a more settled time
- PGY1s would have registrars who have been working in the DHB for a year working with them to settle them in before they move
- The situation with COVID is fragile and the additional time could be beneficial
- Don't require leave for graduation (Otago)
- 13. A small number of respondents thought the benefit of allowing more time for Trainee Interns to complete academic requirements had been overstated and that only a very small percentage of Trainee Interns would require additional time to meet academic requirements. It was also noted by the NZRDA that the current arrangements allow for late starts and graduation had been successfully accommodated to date.

Issues and Mitigations

- 14. The issue most frequently raised requiring mitigation is the stress and financial hardship to Trainee Interns from a delayed start from November 2020 to January 2021. This was also the reason most frequently cited for not supporting the change for 2021 or for proposing a delay. Responders also commented on the lack of notice to prepare for the proposed change and that students from less affluent backgrounds would be most impacted.
- 15. The majority of respondents thought some mitigation of the Trainee Intern financial issue was required and some respondents thought it would have been preferable to have had a financial mitigation proposal included in the consultation. Some also commented on the mental health impact of this.
- 16. A range of mitigations were suggested by respondents including:
 - o a one-off grant or good will retainer,
 - o continuation of the stipend for the period
 - o permanent increase of the stipend for current and future Trainee Intern cohorts
 - o financial assistance to those facing hardship
 - o ability for pay in advance or bridging income
 - o offering two start dates, early start date for those requiring it or staggered start dates
 - o a central DHB pool for the employment of early starts for vacant PGY1 roles
 - short term employment opportunities in DHBs
 - o Funding of research of short- term research opportunities
 - In future years changing the timing of the final stipend payment
- 17. Some respondents noted that a January start was the norm amongst other professions.

- 18. A number of respondents, including STONZ and NZMSA, commented on the adverse impact that COVID had had for the current cohort of Trainee Interns on their part-time employment and this was exacerbating their financial stress and distress and fatigue.
- 19. STONZ also commented in their submission that their support was conditional on serious consideration and discussion on a range of issues raised by their members. These include:
 - The impact on final year trainees including affecting plans for post training fellowships and SMO roles; impact on Gastroenterology trainees
 - RMOs accumulating time in lieu (TIL) for working over the holiday period and the ability to transfer this to the RMOs new DHB in January/February
 - 1-2 weeks between the commencement of HOs and Registrar runs (covered above in suggested Amendments)
 - Honouring current anniversary dates and the associated salary increases
 - Honouring current employment agreements for RMOs due to start in December returning from LWOP, maternity days;
 - Fixed term contracts for housing and childcare and the need to make new arrangements or extend at cost to current cohort
 - Extension of runs beyond current run period (see Translation Issues below)
 - Accommodation availability in January February and the ability for temporary accommodation
 - \circ \quad The need for flexibility and discretion over the transition period
- 20. Some of the concerns above have also been raised by other respondents who also highlighted:
 - The alignment of application and exam dates of various Colleges to the new timetable (see GPEP below). The RDA highlighted the RACP part 1
 - The ability of RMOs to take leave over the 7 week period and for DHBs to be flexible and allow more time to confirm leave over this time
 - o Accommodating and staffing orientation in January
 - Implementing planned job share arrangements (for family and examination reasons) starting from December
 - The negative impact on Trainee Interns clinical skills of having a break
 - o The availability for accommodation in holiday areas in January
- 21. It is noted that the majority of issues raised above are transition issues i.e. applicable only in the first year of implementation.
- 22. The NZMSA highlighted the issue of potential loss of New Zealand graduates and trainees to Australia. The NZRDA commented that the RMO workforce will leave for Australia where pay is higher, and hours of work are less. Another respondent commented that the change would better facilitate the return of New Zealanders to roles in New Zealand and another considered that the proposal could also assist in recruiting Australians to New Zealand roles who may prefer to continue their training here is there was

no loss in training time due to alignment. Another noted that the better alignment, coupled with the fixed term prevocational roles in some states, would be attractive to Australian graduates.

- 23. The risk most frequently raised was RMOs resigning early i.e. prior to Christmas and cover over the Christmas/New Year period. This was signalled in the consultation document. Respondents noted that the following as potential mitigations:
 - Offer 7-week contract extensions to International Medical Graduates (IMGs) and appointment of IMGs
 - Proactive discussion and planning with RMOs around their intentions, flexible approach to options and leave planning
 - Consider early or temporary "stepping up" of House Officers to Registrars
 - Include in offer letters a clause that notes resignation from a House Officer position prior to stepup would also mean resignation from a Registrar role
 - Noted that as a transition issue some examinations had been cancelled or delayed as a result of COVID-19 which may result in some trainees delaying their date for departure until they complete training
- 24. The Royal New Zealand College of General Practitioners (RNZCGPs) has given its support for the proposal but its submission highlights the challenges of implementing all the changes for the General Education Programme (GPEP) in consultation with all its various stakeholder e.g. Ministry of Health, GP practices, Trainees at year 1 and 2 and the NZRDA and medical examiners and educators. The College notes that if this change is not made trainees will be seeking to leave in early December and DHBs will want to retain them to January/ February the following year. This issue is also highlighted in some other submissions including from the Council of Medical Colleges and the New Zealand Medical Association.

Implementation

- 25. The consultation document sought feedback on whether changes to the training year should be implemented through DHB employment offers and other requirements professional/ legal etc to make the change.
- 26. Only a small number of respondents chose to comment on this beyond confirming their agreement that implementation should happen through employment offers.
- 27. Some respondents commented that COVID disruption has provided the opportunity to implement an overdue change.
- 28. Another respondent noted that DHBs routinely change the date of the start of the training year to reflect leap years and the start dates are changed in similar ways in consultation with the RMOs and their representatives.
- 29. One respondent noted that the MCNZ has confirmed they will provide flexibility in the accreditation of runs for House Officers and Trainee Interns where they are in shortened runs and that further discussions will be required with the MCNZ on the accreditation of Quarter 4, which is impacted by the transition approach agreed, including the option to accredit more than one rotation for this period.

Some respondents also highlighted the need for MCNZ to have flexibility regarding ePort entry requirements

30. The NZRDA submission stated there are other requirements to be met to make these changes and these were outlined in a separate letter to DHBs. The key issue raised is that any change requires the agreement of the union(s).

Transitional Issues

- 31. Feedback was sought on transitional issues with the key one being rotation dates for the balance of the 2020 training year. Three options were proposed.
- 32. The preferred option for transition for House Officer Quarter 3 and Quarter 4 rotation is Option 3 (17 weeks Quarter 3 for those who rotated previously and 17 weeks for Quarter 4).
- 33. Respondents noted the main reasons for choosing Option 3 was that a long rotation would not provide training benefit for the whole duration and as a result may increase the risk of resignations. In contrast, a more even rotation would provide a better training experience and reduce the risks associated with early resignations.
- 34. A sub-option for Option 1 was proposed in submissions i.e. a fifth rotation for House Officers as a mitigation to the 21-week Quarter 4 and for this to be managed locally. MCNZ accreditation would be required.
- 35. The NZRDA submission included the proposal, that if the decision is made to change all three rotation dates i.e. Quarters 3 and 4 of 2020 and Quarter 1 of 2021, then there is the ability to decide locally and when changeover will occur. A small number of submissions thought some flexibility would be useful to manage the transition period.
- 36. Some respondents noted that there will be transitional challenges, but these difficulties are not insurmountable.
- Respondents reiterated the importance of reaching a decision promptly- the NRA submission stated by 17 July- to enable implementation planning to get underway. This was also a focus of the NZRCGP's submission.

Decisions

Rotation Dates 2021

- 38. On the basis of the general strength of the support from stakeholders for the proposal through the consultation process, the DHB Chief Executives' decision is:
 - The change of rotation dates will be implemented for the 2021 RMO Training Year
 - The proposed dates for House Officer rotations will be as per the proposal, namely
 - Quarter 1 Monday, 18 January 2021 to Sunday, 18 April 2021 (13 weeks)
 - Quarter 2 Monday, 19 April 2021 to Sunday, 18 July 2021 (13 weeks)
 - Quarter 3 Monday, 19 July 2021 to Sunday, 17 October 2021 (13 weeks)
 - Quarter 4 Monday, 18 October 2021 to Sunday, 16 January 2022 (13 weeks)
 - The proposed dates for Registrar rotations will be amended to re-establish a two-week gap between House Officer and Registrar starts, and to fully align to the Australian dates. The amended dates for Registrars will be:
 - First Half Monday, 1 February 2021 to Sunday, 1 August 2021 (26 weeks)
 - Second Half Monday, 2 August 2021 to Sunday, 30 January 2022 (26 weeks)
- 39. The Chief Executives considered the proposal from some respondents to delay the change to the 2022 training year. Given the mix of current (COVID-19 related) and longer-term benefits, Chief Executives considered the change of training year dates should proceed in 2021 with steps taken to mitigate the concerns raised by this timeframe.

Issues and Mitigations

Financial impact on graduating medical students

- 40. The primary concern raised in responses to the proposed changes was the financial impact on graduating medical students from the later start of DHB employment. The DHBs are keen to address this concern. As outlined above, the responses provided several options for how this might be approached.
- 41. The Chief Executives have agreed that
 - As a one-off transitional mitigation; and
 - Providing the usual pre-employment requirements are satisfied; then
 - Medical students graduating in 2020 will be able to elect to commence DHB employment on the earlier date of 30 November 2020, with their first quarter run aligning to the new dates.

- 42. This allows the Trainee Intern to make the choice between commencing paid employment or taking an extended break after completing study, based on their individual circumstances, rather than making this a common decision applying to all.
- 43. In addition to providing an option for those Trainee Interns who are concerned at the financial implications of a delayed start, it has a number of potential ancillary benefits:
 - a. It provides a mitigation of the concerns raised by some Trainee Interns around loss of currency of their clinical skills during an extended break between study and employment
 - b. On the assumption there is a mix of preferences, it spreads the requirements of orientation and initial supervision
 - c. It allows additional time for those Trainee Interns who may need to complete further requirements before graduating to do so before starting their first quarter runs at the same time as their colleagues.
- 44. Following the completion of the matching process through the Advanced Choice of Employment (ACE) programme, and acceptance of offers of employment for the 2021 training year (October 2020), the employing DHBs will contact their new House Officers to confirm their election of either a November 2020 or January 2021 start date.

Certainty of RMO staffing over the transition period

- 45. As outlined above, there was an acknowledgment by respondents of the potential risk of RMO resignations over the Christmas/New Year period.
- 46. As noted in the Consultation document, RMOs are generally required to provide 3 months' notice of resignation which will provide some lead time for services to be aware and plan to mitigate any gaps. The proposal to offer graduating medical students the option of an 'early start' will assist in providing some flexibility to manage this period.
- 47. In addition, the DHB Chief Executives have agreed that:
 - RMO Units and Services will engage with their current RMOs to confirm their intentions around leave and employment over the 2020/21 Christmas/New Year period.

Timing of Registrar rotation relative to RACP Written Examination

- 48. A number of responses raised a concern about the timing of the RACP Divisional Written Examination relative to the proposed start of the Registrar training year. The Exam is held in mid-February, two weeks after what will be the common Australasian registrar rotation date.
 - The DHBs acknowledge the concerns of RACP trainees and will work with those sitting the 2021 exam to ensure that they are supported in their pre-exam study.

Impact on GPEP1 2021 intake

- 49. The RNZCGP raised transitional matters around the intake into the 2021 First Year GPEP. While supportive of the proposal to change training year dates, the RNZCGP indicated it faced some capacity and contractual issues around aligning its own application and appointment processes to these dates for the 2021 year.
 - The DHBs will work with the RNZCGP to ensure these transitional issues can be managed with least disruption to RMO training.

Other issues raised in feedback

- 50. A number of additional issues and concerns were raised by respondents. Some of these are operational matters which can be clarified, while others are, for the most part, transitional issues that arise from the initial change. This sub-section summarises the DHB responses on these.
- 51. Responses on the operational issues are set out in the following table:

Issue	DHB Response
The impact on final year trainees including affecting plans for post training fellowships and SMO roles	The changes to the training year dates do not stop Senior Registrars who are taking up post-training fellowships or SMO roles from resigning their RMO employment on the originally planned dates. DHBs will support these important transitions.
Honouring current employment agreements for RMOs due to start in December returning from LWOP, maternity days	Despite the changes to the training year dates, RMOs who are planning to return from periods of leave in December 2020 will remain able to do so. These RMOs should discuss and confirm their plans with their DHB. As a result of the change to the training year dates, however, there may need to be further engagement on the run they are returning to over the transition period.
Job share arrangements (for family and examination reasons) starting from December	As above, such agreed arrangements will be honoured by the DHB. Affected RMOs should discuss and confirm their plans with their DHB. As a result of the change to the training year dates, however, there may need to be further engagement on the run they are returning to over the transition period.
Honouring current anniversary dates and the associated salary increases	Anniversaries of service of current RMOs for salary or other service-based entitlements will be unaffected by the change to the training year dates. For example, a current First Year House Officer who commenced employment in November 2019 will be

	eligible to progress through the salary scale in the usual manner on their first anniversary in November 2020.
RMOs accumulating time in lieu (TIL) for working over the holiday period and the ability to transfer this to the RMO's new DHB in January/February	The Holidays Act requires that any alternate holidays the employees have earned must be paid out when employment with the DHB ends [s.60 refers]. There is no exception covering instances where RMOs are rotating to another DHB employer. Any alternate approach would need to be carefully worked through to ensure DHBs meet their statutory obligations and RMOs receive their correct minimum entitlements.

- 52. A number of potential practical issues associated with the initial transition to the new dates were identified by some respondents to the proposal. These included:
 - a. where current RMOs potentially faced increased costs from needing to extend existing fixed-term arrangements for housing and childcare
 - b. potential difficulties in RMOs finding accommodation in January, particularly in popular holiday locations.
- 53. The DHBs have approached the two RMO Unions the NZ Resident Doctors' Association and the Specialty Trainees of NZ and the NZ Medical Students Association to establish a mechanism to raise and help resolve such transitional issues.
- 54. DHBs are sympathetic to situations where RMOs may face penalties (as opposed to simply normal costs) in respect of such personal arrangements because of the changes to training dates. Such situations will need to be considered on a case-by-case basis. The DHBs have endeavoured to communicate this decision as soon as possible to provide certainty to RMOs to enable them to plan for the transition.

Transitional Matters

- 55. The key transitional issue identified by the DHBs was the implication of the changes to rotation dates from 2021 on the balance of the 2020 training year. This impacted principally on House Officers around the timing and length of the third and fourth quarter rotations resulting from
 - a. The delayed inter-DHB mid-year rotations for RMOs
 - b. The extension of the 2020 training year to accommodate the change to a January 2021 start
- 56. As discussed above, there was a r preference across respondents for Option 3. The Chief Executive have therefore decided to progress option 3. This ensures all RMOs will have the opportunity for the minimum 13-week rotation in Quarter three and four, and increases the length of quarter 4 from 14 to 17 weeks. Accordingly, the decision is:
 - Current House Office Quarter 3 rotations will continue to 20 September 2020; and

• House Officer Quarter 4 rotations will run from Monday, 21 September 2020 to Sunday, 17 January 2021

57. In making this decision, there is an acknowledgement of the need for local flexibility and exceptions as operated around the suspension of mid-year inter-DHB rotations. This could include local arrangements to support RMO training being agreed within this national framework (including the opportunities arising from 'early starts' of 2020 graduates), and subject to ensuring that Medical Council expectations are satisfied.