VIEWS & REVIEWS

NO HOLDS BARRED

Margaret McCartney: Stand with junior doctors

Margaret McCartney *general practitioner, Glasgow*

When I turned up for my first day as a doctor there was no pre-written rota. Sort it out among yourselves, we were told. When it was busy we stayed late, and when it was quiet we sent home the junior who had been up all night. We were expected to do a good job; in return, we had professional flexibility. I graduated with debt but no tuition fees. I could afford to rent a place and then get a mortgage for a modest flat within a few years of graduating.

All of this has evaporated. Now, junior doctors graduate with thousands of pounds to repay¹ and are unlikely ever to pay this back fully.² They are managed with such unkind rigidity that a friend of mine couldn't plan to be married, even a year in advance.

And now the government wants to change the way junior doctors are paid. A letter from the Department of Health suggests that newly qualified junior doctors can currently "opt out from weekend, evening and night working," but this applies only for occupational health or other special reasons. The opt-out that does exist is for extending, not reducing, the cap of 48 hours' work a week.³

The government's proposal is to change the hours that attract extra pay for being unsocial. "Plain time" was 7 am to 7 pm on Monday to Friday, and further hours attracted a premium. But the government wants to extend this to 7 am to 10 pm, Monday to Saturday.

The Royal College of Obstetricians and Gynaecologists has warned that doctors will end up working longer, unsafe hours.⁴ Intensive specialties—the ones with current vacancies—will find their training schemes further undersubscribed. The Conservative MP Tom Tugendhat says that junior doctors should give the money it cost to train them back if they don't work for the NHS.⁵ But is it any wonder that so many juniors are talking about leaving it?

I'm sad that so many are looking for their passports. Juniors are the canaries in the NHS mine, and right now it's toxic. Social work cuts have harmed patients and staff, just as underfunding of general practice has led to long waiting times and burn-out. What happens in one part of the NHS affects us all.

The Department of Health doesn't understand the current junior doctor contract, and politicians misuse weekend mortality

statistics to paint a picture of doctors racing off to golf courses at 5 pm.

Doctors have been systematically de-professionalised, subjected to the Medical Training Application Service, and told to comply with non-evidence based inspections, appraisals, contracts, and targets—or be publicly shamed.

We need patients and professionals to be on the same side for an evidence based revolution, or it's NHS bust. For all of these reasons, all senior NHS doctors should stand up for, and together with, their juniors.

Competing interests: I have read and understood the BMJ policy on declaration of interests and declare the following interests: I'm an NHS GP partner, with income partly dependent on Quality and Outcomes Framework points. I've written two books and earn from broadcast and written freelance journalism. I'm an unpaid patron of Healthwatch. I make a monthly donation to Keep Our NHS Public. I'm a member of Medact. I'm occasionally paid for time, travel, and accommodation to give talks or have locum fees paid to allow me to give talks but never for any drug or public relations company. I was elected to the national council of the Royal College of General Practitioners in 2013 and am chair of its standing group on overdiagnosis. I have invested a small amount of money in a social enterprise, Who Made Your Pants?

Provenance and peer review: Commissioned; not externally peer reviewed.

Follow Margaret on Twitter, @mgmtmccartney

- 1 BMA. Debt ridden students forced to cut back on food. 30 Sep 2013. <http://bma.org.uk/news-views-analysis/news/2013/sepember/debt-ridden-students-forced-to-cut-back-on-food>.
- 2 Ercolani MG, Vohra RS, Carmichael F, Mangat K, Alderson D. The lifetime cost to English students of borrowing to invest in a medical degree: a gender comparison using data from the Office for National Statistics. *BMJ Open* 2015;5:e007335. doi:10.1136/bmjopen-2014-007335.
- 3 BMA. European Working Time Directive: Help for junior doctors who want to opt out of the limit of 48 hours a week. <http://bma.org.uk/practical-support-at-work/ewtd/ewtd-juniors/ewtd-opt-out>.
- 4 Royal College of Obstetricians and Gynaecologists. RCOG statement on new contract proposals for junior doctors. 23 Sep 2015. <http://bit.ly/1LPRqJ5>.
- 5 Tugendhat T. Young doctors must repay debt to taxpayers before moving abroad. *Daily Telegraph* 22 Sep 2015. www.telegraph.co.uk/news/health/11883575/Young-doctors-must-repay-debt-to-taxpayers-before-moving-abroad.html.

Cite this as: *BMJ* 2015;351:h5132

© BMJ Publishing Group Ltd 2015