

Worked later career case

A senior SAS doctor has benefits in an older scheme section and the 2015 Scheme. A pay increase is followed by a Pension Savings Statement, while the doctor is also considering partial retirement. The correct sequence is not to choose a retirement date from an online estimate. The doctor first checks membership and remedy information, obtains an official estimate for the contemplated benefits, and asks the employer to define the feasible reduction in pensionable pay and duties. A tax adviser reviews pension input and other saving for the relevant years. A regulated adviser can then compare options within the doctor's wider circumstances. The eventual decision may still involve uncertainty, but it no longer rests on folklore about a single pension age, contribution rate or tax threshold.

Implementation check

After a retirement or partial-retirement decision takes effect, compare the outcome with the agreed plan.

First pension payment checked: _____

Benefits and lump sum compared with award notice: _____

New salary, hours and pensionable pay checked: _____

Continuing scheme membership or accrual confirmed: _____

Tax code and deductions reviewed: _____

Job plan updated and signed: _____

Nomination or family-protection record reviewed: _____

Discrepancy reported to: _____

Do not assume implementation is correct because payment has begun. An error may affect pension and salary records. Keep the employer agreement, correspondence, award notice and statements together, then schedule a later check once a tax year or pension update is available.

Appendix G Glossary

Employment and career terms

Associate Specialist — A closed SAS grade retained by doctors who hold an existing appointment under the relevant arrangements. It should not be used casually as a generic description of senior SAS work.

Locally employed doctor (LED) — A doctor employed on local terms rather than a nationally agreed medical grade contract. LED is an employment description, not a single level of capability or responsibility.

SAS doctor — An umbrella expression commonly used for Specialty Doctors, Specialists and some doctors in closed staff, associate specialist and related grades. The precise contractual grade should be stated when it affects the answer.

Specialist — In this book, normally the senior SAS employment grade introduced through national agreements. It is distinct from being entered on the GMC Specialist Register.

Specialty Doctor — A substantive SAS employment grade under the applicable national contract. Scope and seniority vary; the title alone does not state every duty or capability.

Staff grade — A former grade. Some doctors retain historical service or documents using the term, but it should not replace their current contractual title.

Work and contract terms

Annualisation — A transparent method for converting recurrent or variable work into an annual view, with leave, frequency and other assumptions stated.

Direct clinical care (DCC) — Contractual classification for work directly relating to patient care, interpreted through the applicable national terms and agreed job plan.

Job plan — The prospective agreement recording duties, objectives, supporting resources, timing and other working arrangements. It is more than a retrospective timetable.

On-call availability supplement — Contractual payment linked to qualifying availability arrangements. It should not be confused with allocation of time for work actually undertaken.

Programmed activity (PA) or session — Units used in national medical contracts to describe scheduled work. Definitions, timing and conversion must be taken from the applicable national terms.

Supporting professional activity (SPA) — Work supporting professional practice, such as relevant education, appraisal preparation, governance, teaching or service development, classified under the applicable terms.

Professional assurance terms

Appraisal — A confidential, formative annual professional process that considers the whole scope of practice and supporting information. It contributes to, but is not identical with, revalidation.

Designated body — An organisation prescribed within the responsible-officer framework to which a doctor may have a connection for revalidation purposes.

Fitness to practise — The GMC’s regulatory concept and procedures concerning whether a doctor can practise safely and effectively within the legal framework. It is not a synonym for any complaint or employer concern.

Good medical practice — The GMC’s core professional standards for registered doctors.

Responsible officer — The statutory role that supports clinical governance and makes a revalidation recommendation to the GMC for connected doctors.

Revalidation — The GMC process for confirming continuation of a doctor’s licence, informed by a responsible officer recommendation or another defined route. It is not a certificate issued by the appraiser.

Progression and evidence terms

Capability — Demonstrated ability to perform within a defined area and level of practice. It should be evidenced rather than inferred solely from time served or title.

Curriculum — The approved framework of outcomes and capabilities used for a specialty or training route. Portfolio Pathway applicants must use the current relevant curriculum and specialty guidance.

Primary evidence — In this handbook, material that directly records or demonstrates the activity or contribution claimed. The meaning remains subject to any formal scheme’s own evidence rules.

Portfolio Pathway — The GMC route through which eligible doctors may apply for specialist or GP registration using evidence that they meet the required standard. It replaced former terminology including CESR and CEGPR for new applications.

Regrading or progression to Specialist — A policy route available in Wales and Scotland under their respective arrangements. It is not the ordinary route to a Specialist post in England or Northern Ireland and does not itself confer specialist registration.

Secondary evidence — Material that describes or interprets activity, such as a reflection, CV statement or appraisal summary, rather than directly recording every underlying element.

Specialist Register — The GMC register status relevant to eligibility for certain medical appointments and recognition of specialist registration. It is separate from the Specialist employment grade.

Pension and support terms

Annual allowance — A tax measure limiting tax-relieved pension growth or contributions in a tax year, subject to current rules, taper and possible carry forward.

Defined-benefit pension — A scheme in which benefits are calculated under scheme rules rather than represented by an individual investment pot equal to contributions.

McCloud remedy — Arrangements addressing unlawful age discrimination arising from public-service pension reforms, including choices concerning eligible remedy-period service.

Partial retirement — An arrangement allowing eligible members to draw part or all of specified pension benefits while continuing employment under the relevant scheme and employer rules.

Scheme pays — A facility through which an eligible annual-allowance tax charge may be met by the pension scheme in exchange for a permanent reduction in benefits, under applicable conditions.

SAS advocate — A locally or nationally supported role intended to improve the working experience and development of SAS doctors. Authority and remit depend on the particular arrangement.

Trade union, defence organisation and regulated adviser — Distinct sources of representation or advice. Employment representation, medico-legal support, tax advice and regulated financial advice should not be treated as interchangeable.

Whole scope of practice — Every professional role in which a doctor uses their medical knowledge or licence, not only the principal NHS post.

Verification — Confirmation by an appropriate person or organisation that evidence is authentic or accurately represents specified work; requirements vary by process.

Scope of practice — The work a doctor actually undertakes, including its setting, limits, responsibilities and supporting governance.

Service need — A policy-specific organisational test; its meaning must be taken from the applicable progression policy.