

Board of Directors Meeting in Public

Subject:	Guardian of Safe Working Hours Report	Date: 26 th August 2021		
Prepared By:	Rebecca Freeman – Head of Medical Workforce Jayne Cresswell – Medical Workforce Advisor			
Approved By:	Dr M Cooper – Guardian of Safe working Dr D Selwyn – Medical Director			
Presented By:	Dr Martin Cooper			
Purpose				
Mandatory requirement for assurance of safe working as per the Terms and Conditions of Service (TCS) of the 2016 Junior Doctors Contract.			Approval	
			Assurance	X
			Update	
			Consider	
Strategic Objectives				
To provide outstanding care	To promote and support health and wellbeing	To maximise the potential of our workforce	To continuously learn and improve	To achieve better value
X	X	X	X	X
Indicate Which strategic objective(s) the report support				
Overall Level of Assurance				
	Significant	Sufficient	Limited	None
		X		
Risks/Issues				
Indicate the risks or issues created or mitigated through the report				
Financial	Through fines for breaches of safe hours, additional payment and cost of locums for rota gaps.			
Patient Impact	Adequate medical staffing is required to deliver a safe, sustainable and efficient service for our patients.			
Staff Impact	Engagement with exception reporting and the Terms and Conditions of Service of the 2016 contract is required to retain trainee posts and will impact on recruitment and retention.			
Reputational	Facilitating an environment where there is trust wide engagement with the 2016 contract and exception reporting is positively and constructively responded to so trainees feel this is a Trust where they are able to achieve their training outcomes.			
Committees/groups where this item has been presented before				
Due to be presented at the Joint Local Negotiating Committee after presentation at the Trust Board of Directors.				

Executive Summary

The Guardian of Safe Working Hours report provides information relating to the exception reports received from 1st May 2021 until the end of July 2021.

The report gives an overview of the exception reports that have been received by Division and grade of doctor and the reasons for the exceptions. It indicates that more exception reports are being received from the more junior trainees.

There have been no fines or work schedule review requests during this period.

The vacancy rates remain low as gaps are filled by clinical fellows.

The report describes the introduction of two new rotas in Medicine to provide additional support from Clinical Fellows and Foundation Year 1 doctors out of hours. The report notes the increase in posts in Medicine following the approval of the recent Medical Staffing Business case.

The report also describes the initial observations and actions to be undertaken by Dr Martin Cooper the new Guardian of Safe Working.

Introduction

This report provides an update on exception reporting data, with regard to working hours from 1st May 2021 until 31st July 2021. It outlines the exception reports that have been received over the last three months, the actions and developments that have taken place during this period of time and work that is ongoing to provide assurance that there is safe working as per TCS of the 2016 junior doctors' contract.

High level data

Number of doctors in training (total):	195
Number of doctors in training on 2016 TCS (total):	195
Number of training posts unfilled by a doctor in training:	15
Number of unfilled training posts filled by a clinical fellow/locum:	5
Total number of non-training doctors including teaching fellows:	60
Amount of time available in the job plan for the guardian:	1 PA
Administrative support provided to the guardian:	0.1 WTE
Amount of job planned time for Educational Supervisors:	0.25 PAs per trainee

Exception reports From May 2021 (with regard to working hours)

The data from May 2021 until the end of July 2021 shows there have been 39 exception reports in total, 36 related specifically to safe working hours while 3 were related to educational issues.

1 of the exception reports was categorised by the Trainee as an Immediate Safety Concern. The doctor described it as a very busy out of hours shift on EAU and the team were short staffed. This was a Friday night shift.

Of the 36 exception reports related to safe working hours, 33 were due to working additional hours, 1 was due to concerns around the rota pattern and 2 were related to service support.

By month there were 19 in May 2021, 11 in June 2021 and 9 in July 2021.

Of these 39 exception reports 28 (72%) have been closed with 11 (28%) still open and these are all overdue. Of the 11 overdue exception reports 4 have been escalated to a level 1 review.

For the exception reports where there has been an initial meeting with the supervisor the median time to first meeting is 7.2 days. Recommendations are that the initial meeting with the supervisor should be within 7 days of the exception report. In total 33% (13) of all exception reports either had an initial meeting beyond 7 days or have not had an initial meeting.

Where an outcome has been suggested these are: 13 with time off in lieu (TOIL) and 17 with additional payment.

The Allocate software used to raise exception reports and document the outcome does not currently have the facility to be able to link to the eRota system to confirm TOIL has been taken or additional payment received.

Reasons for ER over last quarter by specialty & grade						
ER relating to:	Specialty	Grade	No. ERs raised	No. ERs closed	No. ERs outstanding	
Immediate	Acute Medicine	CT1	1	0	1	
Total			1	0	1	
No. relating to hours/pattern	Acute Medicine	CT1	3	2	1	
	General medicine	CT1	1	1	0	
	General medicine	FY1	13	11	4	
	General medicine	FY2	6	6	0	
	Geriatric medicine	CT1	3	3	0	
	Geriatric medicine	FY1	2	2	0	
	Obstetrics and gynaecology	FY1	2	2	0	
	Obstetrics and gynaecology	FY2	0	0	0	
	Palliative medicine	ST1	1	0	1	
	Surgical specialties	FY1	2	5	2	
	Trauma & Orthopaedic Surgery	FY2	1	5	0	
Total			34	37	8	
No. relating to educational opportunities	Obstetrics and gynaecology	FY2	1	0	0	
	Obstetrics and gynaecology	ST1	1	1	0	
	Obstetrics and gynaecology	ST2	1	0	1	
Total			3	1	1	
No. relating to service support	Acute Medicine	CT1	1	0	1	
	Obstetrics and gynaecology	FY1	1	0	1	
Total			2	0	2	

Table 1 Exception Reports for Working Hours by Grade and Division

**Acute Medicine shifts involve doctors from the Medical Division*

The majority of the exception reports received during this period - 30 (77%) in total - are from junior doctors working in the Medical Division. Although the doctors are within the Medical Division their Acute Medicine shifts are within the Urgent and Emergency Care Division. Therefore of the 30 exception reports, 4 were whilst doing acute medicine shifts and 26 whilst doing specialty specific or ward based work within Medicine. (Table 1) (Figure 1).

15 of the exception reports have come from the Foundation Year 1 doctors, 15 from the core trainees within the Division and none from the ST3+ trainees.

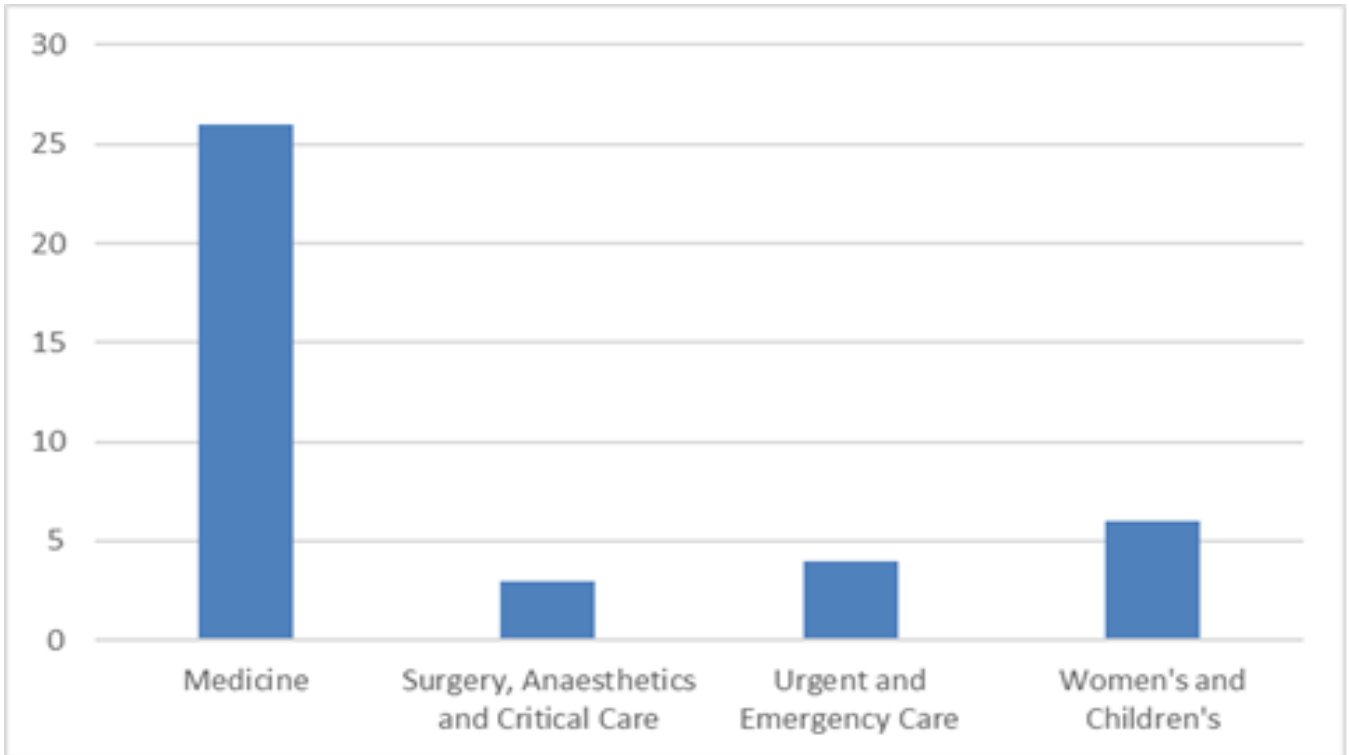


Figure 1 Exception reports by Division for Trainees

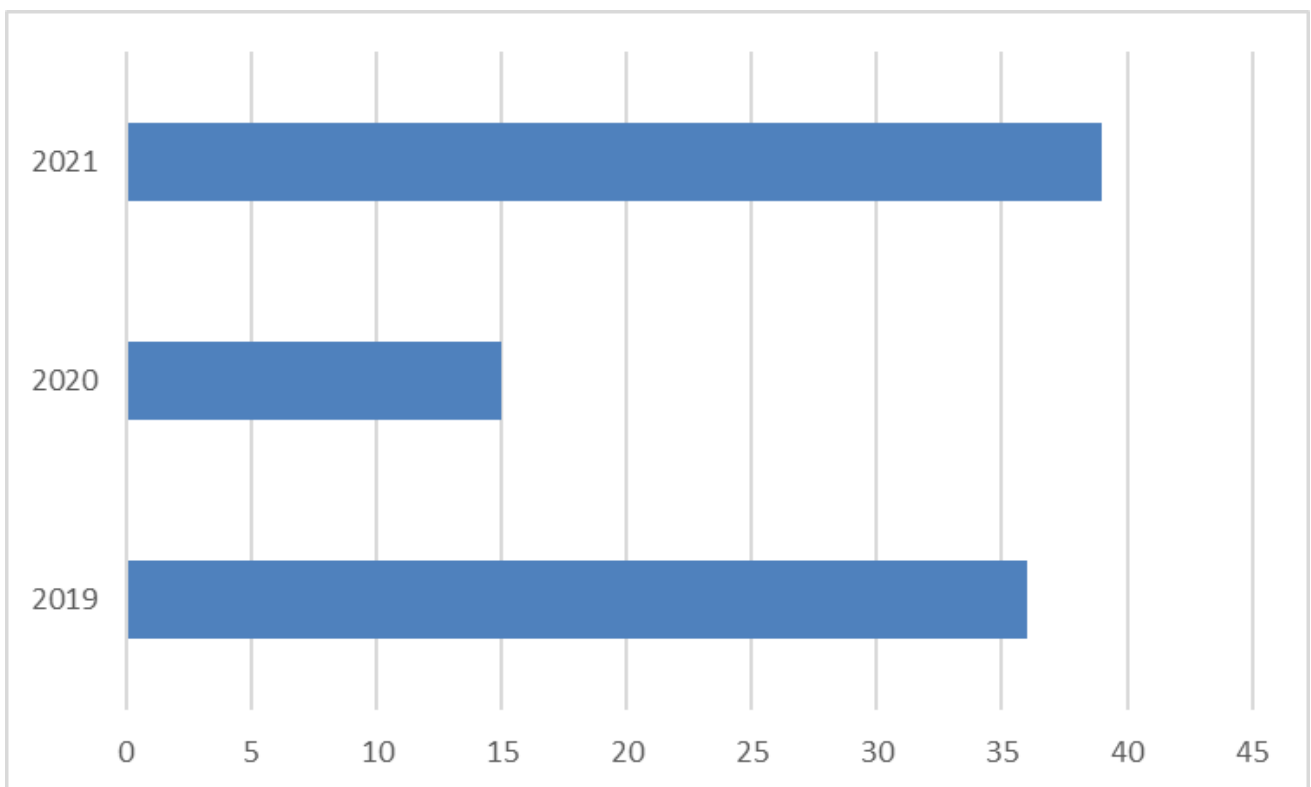


Figure 2. Comparison of number of exception reports for the same period between 2019, 2020 and 2021

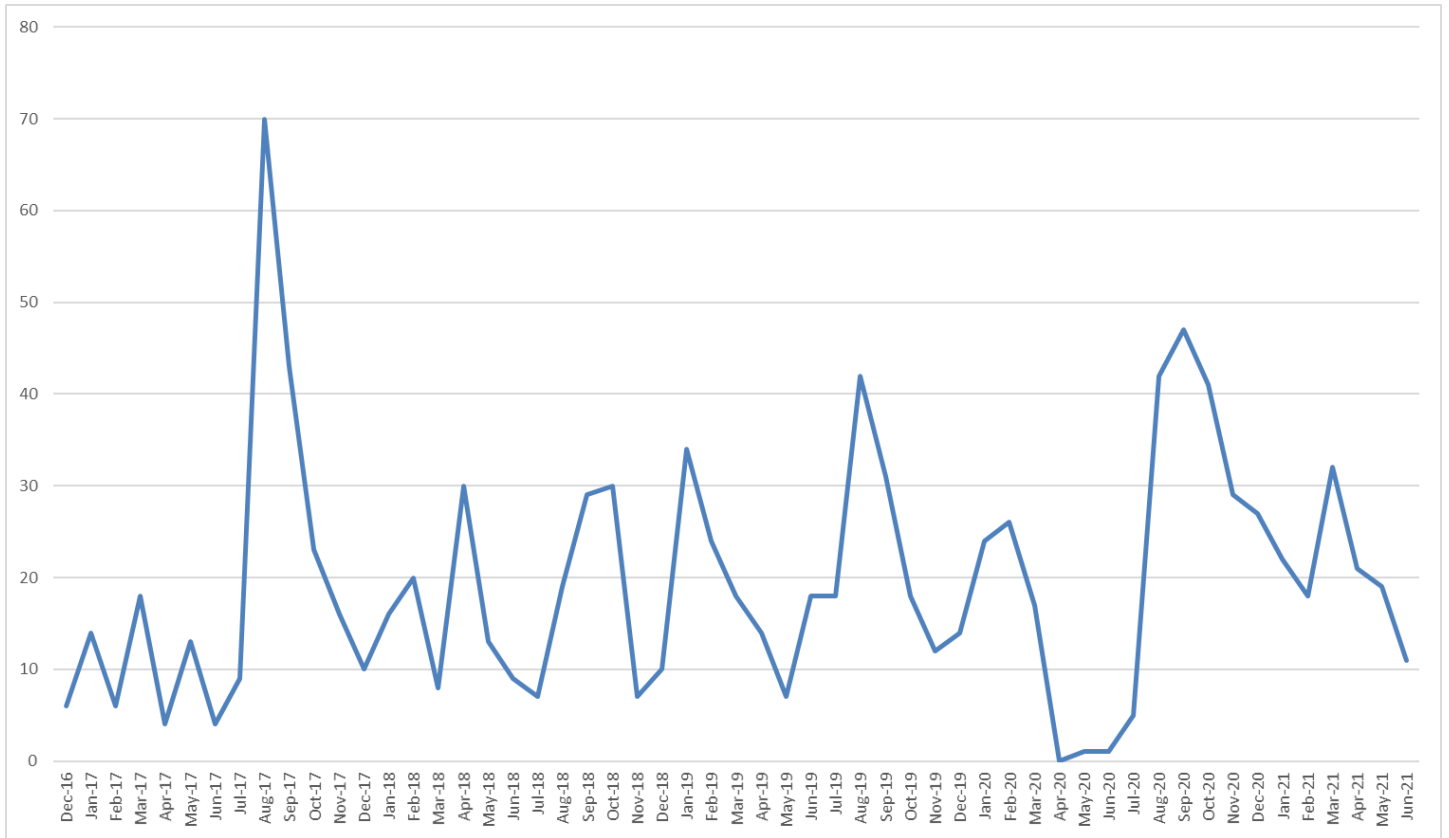


Figure 3. Number of Exception reports by month since the implementation of the 2016 Junior Doctors' Contract

Currently the proportion of junior doctors in training in each of the three tiers of F1, F2/CT/IMT1-2/ST1-2/GPST and ST3+ are 20%, 50% and 30%. However, the proportion of total exception reports from each tier is 50%, 50% and 0% respectively.

Figure 4 shows that this year there have been more exception reports from Foundation Year 1 doctors than in the previous two years. There has been a lot of work undertaken at various trainee forums to encourage trainees to complete exception reports which has been realised in the case of the more junior trainees however as can be seen from figure 1, exception reports are less likely to be completed by the more senior trainees and this has been the case since the implementation of the exception reporting process.

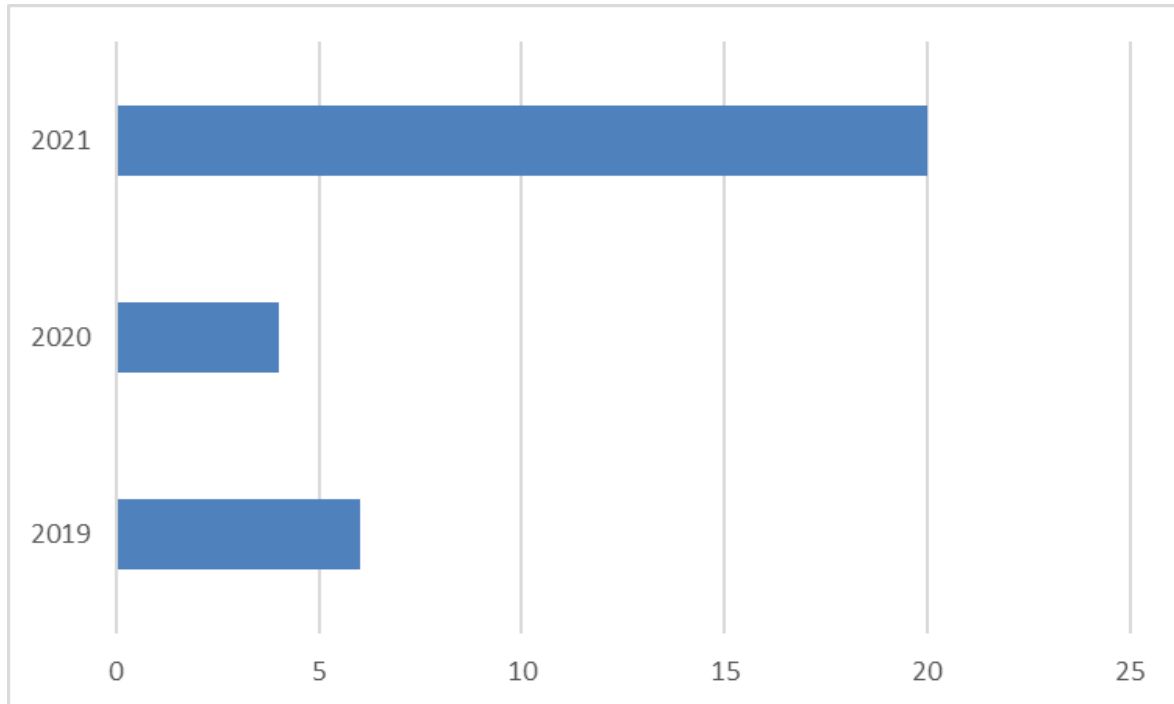


Figure 4. Number of Exception reports by F1 doctors for the same quarter between 2019, 2020 and 2021.

Work Schedule Reviews

There have been no work schedule reviews.

Exception reports continue to be dealt with as a one-off with few progressing to a work schedule review for issues that are recurrent.

Fines

There were no fines issued this quarter.

Vacancies

15 of the 195 training posts are unfilled by a doctor in training, however, 5 of the 15 vacancies are filled by a Clinical Fellow. The remaining gaps are offered to doctors on the Trust bank or to locum agencies.

Qualitative information

As you are aware from the previous report, prior to this period floor rotas had been in place to ensure safe staffing until the changeover in April 2021. In addition, prior to the changeover, the Clinical Chairs group and the Medicine Division had been reviewing historic safe ward based medical staffing levels in view of the increased patient activity, demand and acuity. This followed increased feedback from medical trainees regarding out of hours and overnight activity along with a benchmarking process against the Royal College of Physicians staffing guidelines.

As immediate actions, it was agreed by the Medical Division to implement a rota for the Clinical Fellows providing additional cover overnight and at the weekend. This rota has been in place since the beginning of April.

In addition following discussion with the Foundation Training Programme Directors, it was agreed that the Foundation Year 1 doctors would work nights between April and August 2021. The Foundation Year 1 doctors worked nights whilst supporting the floor rotas and it was agreed for this to continue. A review of this rota was conducted by the Chief Registrar in May 2021. The review found that the Foundation Year 1 doctors felt they were well supported during the night shifts and from a learning and development perspective they had benefited from the experience and therefore felt more prepared going into the Foundation year 2 having completed a number of night shifts.

As a consequence of implementing both the Clinical Fellow rota and the Foundation Year 1 rota, there has been a slight reduction in the exception reports in Medicine relating to out of hours work. This will be monitored going forwards.

The Medical business case was approved which has resulted in an additional 11 clinical fellows being recruited which will provide additional support on the wards. These posts have now been recruited to. Whilst the majority are now in post, there are still some that are yet to commence in post, those being the doctors who have been recruited from overseas. Of those who are in post, a number are working in a supernumerary capacity as part of their induction period and therefore the full impact of having additional doctors in post will be realised in December when they will be in post and have completed their supernumerary period. In addition to having Clinical Fellows, there was also an agreement by the Trust to fund an additional 6 IMT3 posts in Medicine. Having these posts in place has enabled a shadow rota at Middle Grade to be developed which is populated by both the IMT3 doctors and the Senior Clinical Fellows in Acute medicine.

This has provided additional support for the Medical Registrar out of hours which is an extremely busy on call shift and initial feedback suggests that this has made a significant difference. Further detail will be provided in the next quarterly report.

Initial Observations and Actions to be undertaken by the new Guardian of Safe Working

Dr Martin Cooper – Consultant in Stroke Medicine commenced in post as the Guardian of Safe Working on 1st June 2021. Since commencing in post, he has taken the opportunity to talk to a number of trainees by visiting the wards and asking them about their experience of working at the Trust. He has also taken the opportunity to attend junior doctors forums and introduced himself to the trainees that commenced in post in August at their induction. In general, the feedback that he has received since commencing in post is that trainees feel they are encouraged to exception report. An action for him going forward is to talk to the more senior trainees about exception reporting as to date, the discussion he has had has been with the more junior trainees.

The intranet page for the Guardian of Safe Working has been updated with the details of the new guardian and other related information including a link to the Trust Wellbeing Offer and this will be a source of information for the trainees and will continue to be promoted to the trainees by Dr Cooper.

Dr Cooper has spoken to consultant colleagues to encourage the timeliness of responding to exception reports in their role as educational supervisors. He, together with the Head of Medical Workforce plan to attend the Educational Supervisors Forum to discuss the importance of responding to exception reports in accordance with the Junior Doctors contractual requirements. Dr Cooper will also take the opportunity to present the Guardian of Safe Working Quarterly report at the forum.

Going forward, Dr Cooper also plans to report on the exception reports that are received from Clinical Fellows, Senior Clinical Fellows and Foundation Year 3 doctors, as this group of doctors now make up a significant part of the Medical Workforce and he believes that this report should also include this data. Although this information cannot be captured electronically using the allocate system, this data is captured by the Medical Workforce Team and will be reported on in future quarterly reports. Actions arising from the report have been included in appendix 1.

Conclusion

Trust Board is asked to:

- Note the increase in Trainee numbers and Clinical Fellows in Medicine as a result of the significant investment in resource to ensure safe staffing in light of increasing demand, complexity and patient acuity.
- Recognise that exception reporting will continue to increase in the short to medium term as more senior trainees are targeted.
- Note that future reports will contain exception reports relating to Clinical Fellows and other non training grade doctors.
- Note that discussions will continue to take place with Educational Supervisors regarding the timely completion of exception reports and the Guardian of Safe Working will attend the Educational Supervisors forum. Ongoing support will also be provided to support them to respond to the exception reports.

Appendix 1

Issues/Actions arising from the Guardian of Safe Working Report

Action/Issue	Rag Rating	Action Taken (to be taken)	Date of completion
Work schedules are not being used as live documents by trainees as they feel it is a duplication of their PDP.		This has been raised with NHS Employers for consideration as this is the case nationally.	ongoing issue
Educational/Clinical Supervisors to be encouraged to complete exception reports in a timely manner.		Guardian of Safe Working and the Head of Medical Workforce to attend the Educational Supervisors forum to encourage them to review exception reports in a timely manner.	End November 2021
Undertake a review of the out of hours rota in Medicine		The Clinical Fellow rota and Foundation Year 1 rota have been implemented and initial feedback from the Foundation Year 1 Doctors was positive and has been described in the body of the report.	Complete
Include Clinical Fellows and other non training grade exception reporting data in future Quarterly reports.		To be included in the next report in November 2021.	30 th November 2021