

**Board of Directors Meeting in Public**

<b>Subject:</b>	Guardian of Safe Working Hours Report	<b>Date:</b> 2 <sup>nd</sup> March 2023		
<b>Prepared By:</b>	Rebecca Freeman – Head of Medical Workforce Jayne Cresswell – Medical Workforce Specialist			
<b>Approved By:</b>	David Selwyn - Medical Director			
<b>Presented By:</b>	David Selwyn - Medical Director			
<b>Purpose</b>				
This report is a Mandatory requirement for assurance of safe working as per the Terms and Conditions of Service (TCS) of the 2016 Junior Doctors Contract.		<b>Approval</b>		
		<b>Assurance</b>	X	
		<b>Update</b>		
		<b>Consider</b>		
<b>Strategic Objectives</b>				
<b>To provide outstanding care</b>	<b>To promote and support health and wellbeing</b>	<b>To maximise the potential of our workforce</b>	<b>To continuously learn and improve</b>	<b>To achieve better value</b>
	X	X	X	X
<b>Identify which principal risk this report relates to:</b>				
PR1	Significant deterioration in standards of safety and care			X
PR2	Demand that overwhelms capacity			X
PR3	Critical shortage of workforce capacity and capability			X
PR4	Failure to achieve the Trust's financial strategy			
PR5	Inability to initiate and implement evidence-based improvement and innovation			
PR6	Working more closely with local health and care partners does not fully deliver the required benefits			
PR7	Major disruptive incident			
PR8	Failure to deliver sustainable reductions in the Trust's impact on climate change			
<b>Committees/groups where this item has been presented before</b>				
Due to the Local Negotiating Meeting due to take place on Thursday 16 <sup>th</sup> February being cancelled, this paper has not been presented to the committee, however, it has been circulated to the members of the Committee.				

## Executive Summary

The Guardian of Safe Working Hours report provides information relating to the exception reports received between 1<sup>st</sup> November 2022 and 31<sup>st</sup> January 2023.

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, making comparisons against previous years.

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

The report also describes actions that have been undertaken during this quarter and actions that are planned for the next three months.

The report outlines the reasons for the 2 immediate safety concerns that were reported during this period, one relates to only having a short lunch break whilst the other was as a result of staff shortages.

Trust Board is asked to note:

- The increase in exception reports particularly from F1 doctors from the same quarter in 2021 and that the number of exception reports from senior Postgraduate Trainees is gradually increasing.
- That both the Postgraduate Trainees and the Clinical Fellows on ward 34 feel more supported and the ward is more organized.
- The more straight forward exception reports will be responded to by the Medical Workforce Team going forwards.
- The current Guardian of Safe Working is due to retire at the end of March 2023 and the post is currently being advertised.
- There are a number of system developments due to be released over the next few weeks.
- The Clinical Fellows will raise exception reports through the system.

## Introduction

This report provides an update on exception reporting data, from 1<sup>st</sup> November 2022 to 31<sup>st</sup> January 2023. It outlines the exception reports that have been received during the last three months, the actions and developments that have taken place during this time and work that is ongoing to provide assurance that there is safe working as per TCS of the 2016 junior doctors' contract.

As can be seen from the below, 205 (200.8 FTE) postgraduate doctors in training have been allocated to the Trust by Health Education East Midlands (HEEM).

The Trust has an establishment of 224 trainee posts, so this quarter there are 19 (23.2 FTE) vacant trainee posts, this is due to HEEM not being able to fill these posts for a number of reasons, including doctors being on maternity leave (4 doctors, 3.5 FTE), doctors leaving the training programme or there not being enough trainees following a particular training pathway to fill the posts across the country. The doctors are allocated to the Trust via an automatic allocation system, a maximum of three months prior to the doctor coming to the Trust. The reasons for the vacancies are often unknown unless a doctor has commenced with the Trust and then left part way through the rotation, however, the general reasons are described above. Anyone leaving the training programme after commencing at the Trust would be offered an exit interview.

**High level data as of 31<sup>st</sup> January 2023**

	<b>Posts</b>	<b>Heads</b>	<b>FTE</b>
Established doctor in training posts:	224		
Number of doctors in training in post:	202	205	200.8
Number of training posts unfilled by a doctor in training:	22	19	23.2
Number of unfilled training posts filled by a non-training doctor:	6	6	5.6
Established non-training doctor posts:	98		
Number of non-training doctors in post:	82	82	81.4
Number of non-training posts unfilled:	16	16	16.6

**High level data from previous quarter (as of 31st October 2022)**

	<b>Posts</b>	<b>Heads</b>	<b>FTE</b>
Established doctor in training posts:	225		
Number of doctors in training in post:	207	207	202.5
Number of training posts unfilled by a doctor in training:	20	20	22.5
Number of unfilled training posts filled by a non-training doctor:	5	5	4.1
Established non-training doctor posts:	92		
Number of non-training doctors in post:	81	81	81
Number of non-training posts unfilled:	11	11	11

There has been a decrease in doctor in training posts by 1 due to an additional Academic Fellow post being assigned to the Trust in the first quarter. The non-training posts have increased by 6 due to a business case being approved for ED.

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 November 2022 (with regard to working hours)**

The data from 1<sup>st</sup> November 2022 to 31<sup>st</sup> January 2023 shows there have been 87 exception reports in total, 70 related specifically to safe working hours while 7 were related to the rota pattern, 6 were related to educational issues and 4 related to service support.

Two of the exception reports were categorised by the postgraduate trainees as immediate safety concerns. Further details of the immediate safety concerns can be found in Table 1.

By month there were 16 exception reports in November 2022, 35 in December 2022 and 36 in January 2023.

Of the 72 exception reports relating to safe working hours, 60 were due to working additional hours, 7 were due to natural breaks and 1 was due to rest.

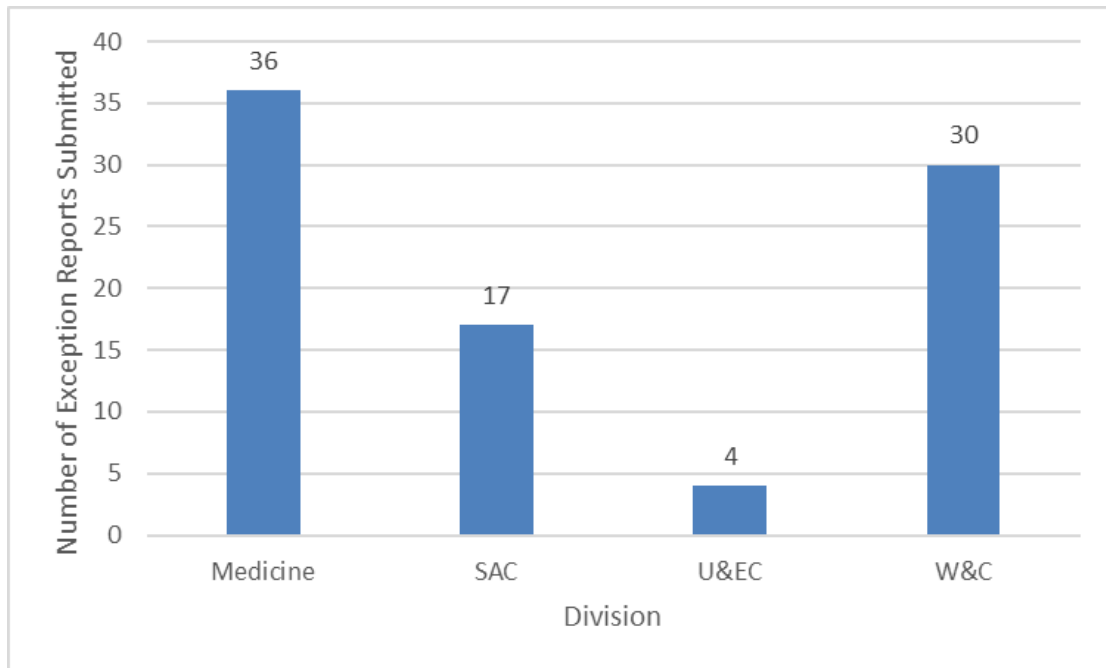
Of the total 87 exception reports 28 (32%) have been closed with 59 (68%) still open, 55 of these are overdue. Of the 55 overdue exception reports, 50 are still waiting for the initial meeting to take place, the other 5 are unresolved.

For the exception reports where there has been an initial meeting with the supervisor the median time to first meeting is 9 days. Recommendations are that the initial meeting with the supervisor should be within 7 days of the exception report. In total 65 (75%) of all exception reports either had an initial meeting beyond 7 days or have not had an initial meeting. Whilst the system does send a notification to the supervisor that an exception report requires action, further notifications from the system would help to remind the supervisors of exception reports requiring their attention and the time limit by which they need to respond. Currently manual reminders are sent from the Guardian of Safe Working and the Medical Workforce Team.

Where an outcome has been suggested there are 16 (57%) with time off in lieu (TOIL) totaling 22 hours and 45 minutes, 11 (39%) with additional payment totaling 5 hours and 20 minutes at normal hourly rate and 2 hours at premium rate and 1 (4%) with no further action.

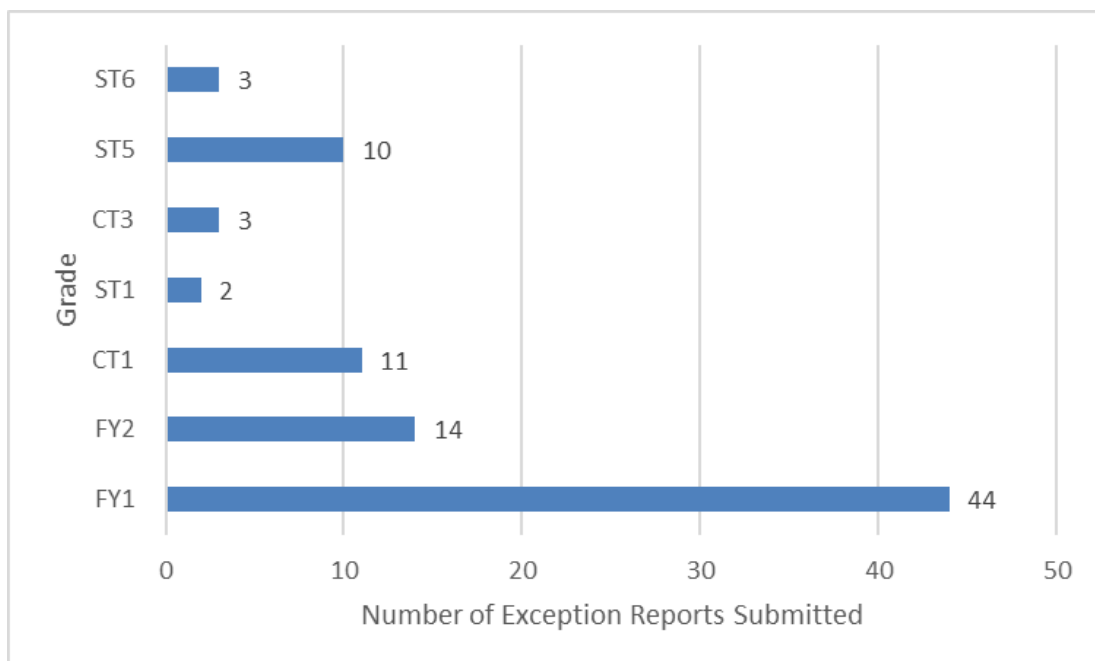
The Allocate software used to raise exception reports and document the outcome does not currently have the facility to be able to link to the eRota system to confirm TOIL has been taken or additional payment received, therefore this is actioned manually by the Medical Workforce Team, a report is completed for the rota coordinators to ensure that time off in lieu is added to the doctor's record or any payment is made.

A number of system upgrades are planned over the next few months that will include additional reminders being sent where exception reports remain outstanding and the ability for the administrator to close exception reports that the doctor has not closed in a timely manner.



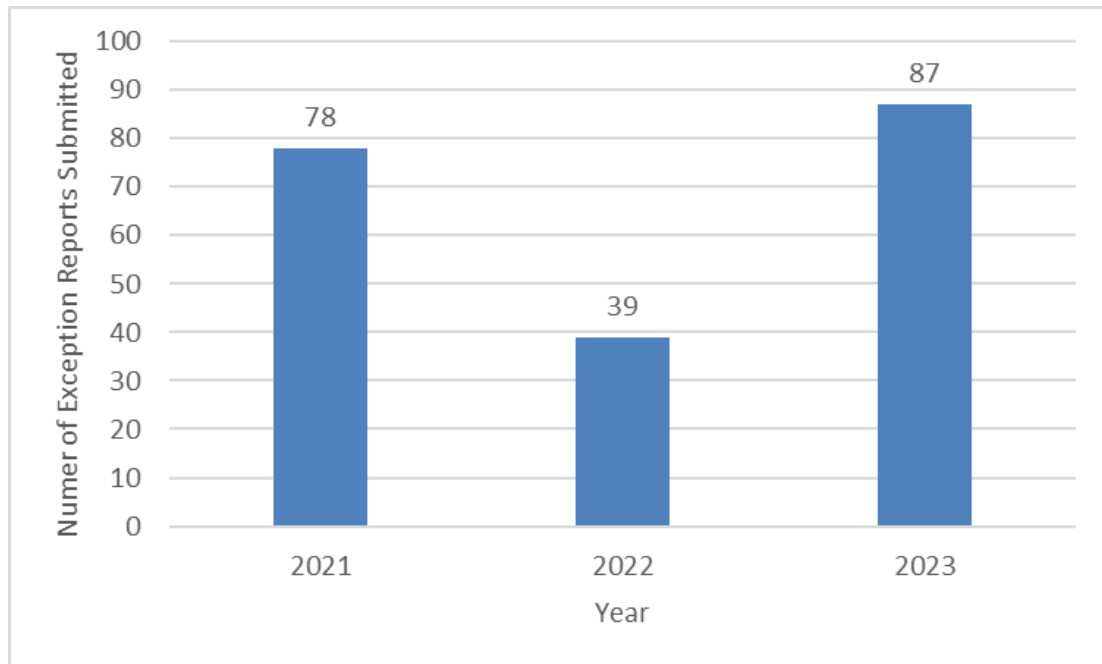
**Figure 1. Exception reports by Division for Trainees**

Figure 1 shows that the majority of the exception reports received during this period - 40 (46%) in total - are from postgraduate trainees working in the Medicine Division. Although the doctors are within the Medicine Division their acute medicine shifts are within the Urgent and Emergency Care Division. Therefore, of the 40 exception reports, 4 were whilst doing acute medicine shifts and 36 whilst doing specialty specific or ward-based work in medicine.



**Figure 2. Exception reports by Grade for Trainees**

Figure 2 shows a high number of exception reports were submitted by the Foundation Year 1 Doctors. In total 44 (50%) of the exception reports have come from the Foundation Year 1 Doctors, 27 (31%) from the Foundation Year 2 Doctors, CT1/2 and ST1/2 doctors and 16 (19%) from CT3/ST3+ doctors.

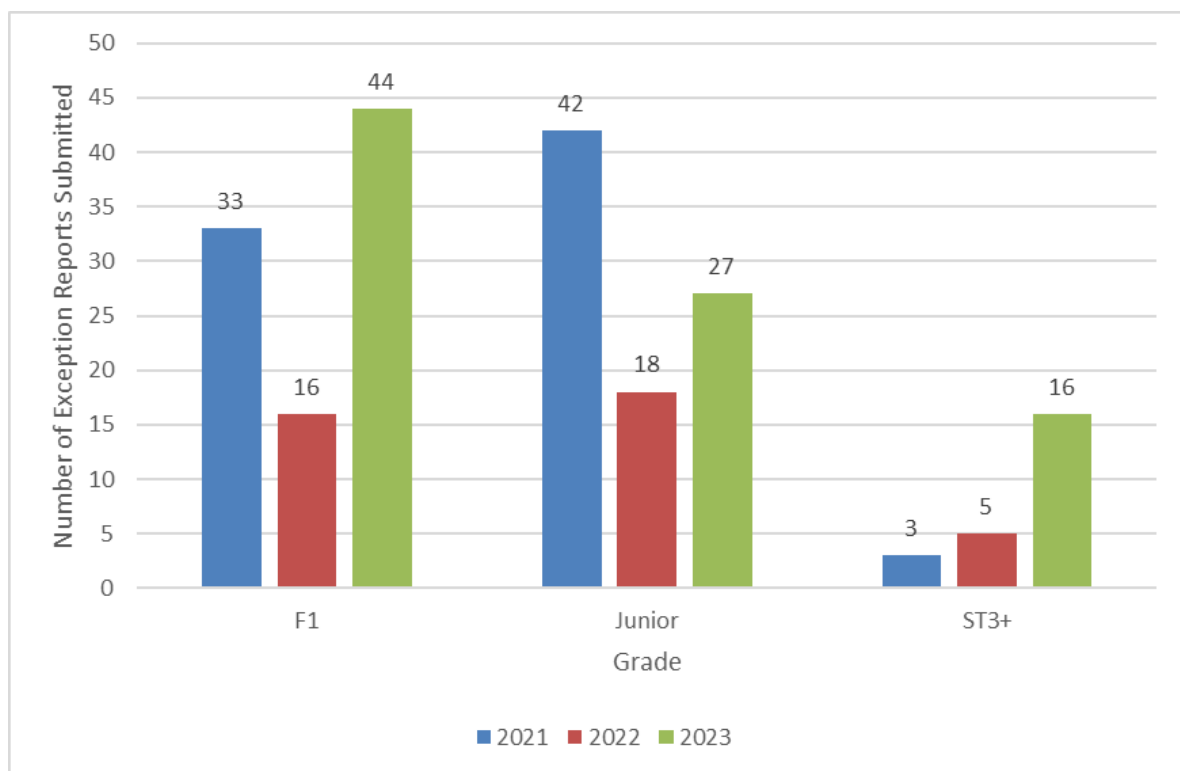


**Figure 3. Comparison of number of exception reports for the same period between 2021, 2022 and 2023**

Before the Pandemic, in 2018 for the same quarter, this number was 137 and in 2019 it was 66. The above shows a decline in exception reports for the same quarter in 2022. At this point in 2022 there were high numbers of COVID patients in the hospital and interim rotas were put in place to provide additional support given the high numbers of patients in the Trust, particularly just prior to and after the Christmas period.

Date	Grade and Specialty of Doctor	Details of Immediate Safety concern reported by the Trainee	Action Taken	Status of the Concern
08.12.22	CT1 in Paediatrics	The Trainee reported that they were only able to have a short 10 minutes lunch break.	Registrar and consultant were made aware	The report is Closed
23.12.22	F1 in General Surgery	The trainee worked an additional 1 hour and 10 minutes. The trainee had finished their jobs for the day by 4.30pm so went to SAU to help for the final 30 minutes of the shift. They noticed a patient deteriorating and so stayed to help care for the patient as the doctor due to work the twilight shift was delayed. The twilight doctor arrived at 6pm and the trainee then left.	A review of the Exception report has been completed by the Clinical Supervisor.	The report is now waiting for the doctor to close it.

**Table 1. Immediate Safety Concern Concerns Raised**



**Figure 4. Number of Exception reports by doctors by grade for the same quarter between 2021, 2022 and 2023.**

Figure 4 shows that this year there have been more exception reports from the Foundation Year 1 doctors and the ST3+ doctors than in previous years but there are less exception reports from the junior grade doctors than in 2021. However, overall the number of exception reports is increasing.



## **Exception Reports from Clinical Fellows**

There are 82 Clinical Fellows and other non-training doctors. During this quarter there have been 7 exception reports received from Clinical Fellows. 5 reports were from the doctors in Acute Medicine and 2 were from doctors in Medicine. 5 reports were due to working additional hours and 2 were raised as immediate safety concerns due to a shortage of staff overnight. For those that worked additional hours, they worked an average of an additional 50 minutes each at the end of a normal working day, the exception reports have been reviewed by the clinical supervisors, all were supported and time in lieu or pay to the doctors. All are now closed.

The Clinical Fellows are regularly reminded about completing exception reports.

Going forward the Clinical Fellows will use the allocate system to report exception reports. This process will start from the beginning of March and going forward Clinical Fellows will be included with other grades of doctor.

## **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**

The Trust currently has 205 doctors in training. As mentioned in the introduction, there are 19 vacancies currently where the Trust has not been allocated trainees by HEEM, the reasons for these posts not being filled were also mentioned in the introduction, 6 of the vacancies are currently filled by Clinical Fellows. Clinical Fellow recruitment is ongoing with the aim of filling as many training vacancies as possible. The Medical Workforce Team have recently taken over the recruitment of all Medical staff, this will enable a better oversight of the recruitment picture as a whole. As detailed above there will always be vacancies for a variety of reasons and it is important to anticipate the likely number of gaps based on the position historically and proactively recruit additional Clinical Fellows and Senior Clinical Fellows to mitigate that position each year. The Trust still receives approximately 45% of the basic salary for the post where they have not been able to fill the gap but when recruiting a Clinical Fellow to fill any vacancy there is the additional cost of a supernumerary period of 8 weeks as generally Clinical Fellows are new to the NHS and therefore require a comprehensive introductory period. Currently the gaps that remain unfilled are covered on a temporary basis by doctors on the Trust bank.

## **Qualitative information**

The number of exception reports made by the more senior trainees' is increasing with 16 being reported this quarter an increase of 11 from the same quarter last year. The number of exception reports has increased significantly over the last quarter, particularly amongst the F1 doctors, the hospital has remained extremely busy particularly over the Christmas period, whilst it is still felt that there is some under reporting this is improving and the junior doctors are encouraged to exception report at every opportunity. The response to the exception reports by Educational and Clinical Supervisors within the required 7 days has deteriorated. Table 3 below

indicates the number and percentage of exception reports that were not responded to within the required time frame of 7 days over the last year. Despite reminders, this number has increased considerably. The Guardian has agreed to manage this differently going forward. Going forward the Medical Workforce Team will review the exception reports, highlighting those that are more complex and require clinical intervention to the Clinical Supervisors and responding to the remainder.

<b>Date of the Guardian Report</b>	<b>Number and Percentage of reports <u>not</u> responded to within 7 days</b>
November 2022 – January 2022	75% of all reports received 65 reports
August 2022 – October 2022	66% of all reports received 72 reports
May 2022 – July 2022	25% of all reports received 10 reports
February 2022 – April 2022	56% of all reports received 38 reports
November 2021 – January 2022	50% of all reports received 15 reports

**Table 3 Exception Reports not responded to within 7 days**

The Guardian of Safe working attended a regional Guardian meeting on 23<sup>rd</sup> November 2022 and the National Guardian of Safe Working Conference on 25<sup>th</sup> November 2022. Both meetings were very informative and have resulted in rich discussions taking place around best practice. Dr Martin Cooper the Guardian of Safe Working is retiring from the Trust at the end of March 2023. The post is currently being advertised.

The Guardian of Safe Working and the Head of Medical Workforce visited ward 34 in January, where a number of exception reports had previously been raised relating to the lack of Medical staff and the disorganisation of the ward. Both were pleased to see that the issues had been addressed and additional support was available on the ward. The doctors also reported that the consultants had made a number of changes to improve the organisation of the ward and this change had been well received by both the Postgraduate Trainees and Clinical Fellows.

On talking to the Postgraduate Trainees a number don't find the exception reporting system to be user friendly. This has been fed back to Allocate the software provider and a number of system improvements have been developed which will be released within the next few weeks.

This has created an ideal opportunity to re-send updated hints and tips for exception reporting together with the details of the system improvements when released.

It is important to add that the morale of the trainee postgraduate doctors is particularly low. Following the outcome of the recent ballot, it is likely that a 72 hour strike will take place over the next few weeks. Planning for this action is being progressed.

## **Conclusion**

Trust Board is asked to note:

- The increase in exception reports particularly from F1 doctors from the same quarter in 2021 and that the number of exception reports from senior Postgraduate Trainees is gradually increasing.
- That both the Postgraduate Trainees and the Clinical Fellows on ward 34 feel more supported and the ward is more organized.
- That the more simple exception reports will be responded to by the Medical Workforce Team going forwards.
- That the current Guardian of Safe Working is due to retire at the end of March 2023 and the post is currently being advertised.
- That there are a number of system developments due to be released over the next few weeks.
- With immediate effect the Clinical Fellows will report exceptions using the allocate system.

**Appendix 1**

**Issues/Actions arising from the Guardian of Safe Working Report**

Action/Issue	Action Taken (to be taken)	Date of completion
Exception reports being responded beyond the first 7 days.	The Medical Workforce Team will manage the more straight forward exception reports, whilst still encouraging the Clinical Supervisors to respond those requiring Clinical input.	28 <sup>th</sup> February 2023
Recruitment to the post of Guardian of Safe Working	The post is currently being advertised.	Ongoing
Planned System Improvements	Implementation of the system improvements by Allocate, the impact of the improvements will be monitored and an update provided in the next report.	30 <sup>th</sup> April 2023