

## Board of Directors Meeting in Public - Cover Sheet

<b>Subject:</b>	Guardian of Safe Working Report		<b>Date:</b> 7 <sup>th</sup> September 2023		
<b>Prepared By:</b>	Rebecca Freeman - Head of Medical Workforce, Jayne Cresswell – Medical Workforce Specialist				
<b>Approved By:</b>	Dr Navtej Sathi – Guardian of Safe Working				
<b>Presented By:</b>	Dr Navtej Sathi – Guardian of Safe Working & Dr David Selwyn – Medical Director				
<b>Purpose</b>					
To provide the Board of Directors with an update on the exception reports received from Postgraduate Trainees and Clinical Fellows between 1 <sup>st</sup> May 2023 and 31 <sup>st</sup> July 2023.				<b>Approval</b>	
				<b>Assurance</b>	<b>X</b>
				<b>Update</b>	
				<b>Consider</b>	
<b>Strategic Objectives</b>					
Provide outstanding care in the best place at the right time	Improve health and well-being within our communities	Empower and support our people to be the best they can be	To continuously learn and improve	Sustainable use of resources and estate	Work collaboratively with partners in the community
<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>		
<b>Principal Risk</b>					
PR1	Significant deterioration in standards of safety and care				<b>X</b>
PR2	Demand that overwhelms capacity				<b>X</b>
PR3	Critical shortage of workforce capacity and capability				<b>X</b>
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>					
Joint Local Negotiating Committee					
<b>Acronyms</b>					
TCS – Terms and Conditions of Service WTE - Whole Time Equivalent NHSE – National Health Service England ED – Emergency Department O & G – Obstetrics & Gynaecology T & O – Trauma & Orthopaedics PA – Programmed Activity TOIL – Time Off in Lieu Ct – Core trainee St – Specialty trainee HOOH – Hospital out of Hours NEWS – National Early Warning Scoring EAU – Emergency Assessment Unit GMC – General Medical Council					
<b>Executive Summary</b>					
The paper provides the Committee with an update on the exception reports received from Postgraduate Trainees and Clinical Fellows between 1 <sup>st</sup> May 2023 and 31 <sup>st</sup> July 2023.					

The Board of Directors is asked to note the following:

- The slight reduction in Exception reports from this time last year.
- The largest number of exception reports have been received from doctors in Medicine, however, a number of these exception reports relate to the out of hours shifts that are done in Acute Medicine.
- The automated system reminders are slightly improving the response rates of Clinical and Educational supervisors, this requires a continued focus.
- Dr Sathi has commenced in post as the new Guardian of Safe Working Hours.
- Rotas have been prepared and sent to the Trainees commencing in post in August. These rotas incorporate the additional training posts that the Trust was successful in the recent HEE bidding process.
- Concerns have been raised by both trainees and clinical fellows relating to Acute Medicine which are being addressed by the Director of Medical Education with the involvement of the Guardian of Safe Working hours.
- The action plan detailed in appendix 1.

## **Guardian of Safe Working Report covering the period from 1<sup>st</sup> May 2023 to 31<sup>st</sup> July 2023**

### **Introduction**

This report provides an update on exception reporting data, from 1<sup>st</sup> May 2023 to 31<sup>st</sup> July 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, 197 (195.4 WTE) postgraduate doctors in training have been allocated to the Trust by NHSE. The Trust has an establishment of 224 trainee posts, so this rotation, the last rotation of the year, there are 27 vacant trainee posts. This is due to NHSE not being able to fill these posts for a number of reasons, including doctors being on maternity leave (2 doctors, 1.8 WTE), unanticipated lack of training progress (not passing their exams), doctors leaving the training programme early, or there not being enough trainees following a particular training pathway to fill the posts across the country. The Trust isn't always informed of the reasons for the vacant posts and as can be seen from previous reports, these vacancy numbers fluctuate for each rotation. Further information is included in the vacancies section.

### High level data as at 31<sup>st</sup> July 2023

	Posts	Heads	WTE
Established doctor in training posts:	224		
Number of doctors in training in post:	197	203	195.4
Number of vacant training posts:	27	-	28.6
Number of unfilled training posts filled by a non-training doctor:	5	-	4.8
Established non-training doctor posts:	106		
Number of non-training doctors in post:	108	108	106.4
Number of vacant non-training posts:	-2	-	-0.4

### High level data from previous quarter (as of 30<sup>th</sup> April 2023)

	Posts	Heads	WTE
Established doctor in training posts:	224		
Number of doctors in training in post:	201	204	196.6
Number of vacant training posts:	23	-	27.4
Number of unfilled training posts filled by a non-training doctor:	5	-	4.8
Established non-training doctor posts:	97		
Number of non-training doctors in post:	90	90	89.6
Number of vacant non-training posts:	7	-	7.4

The doctor in training posts have remained static at 224. The non-training doctor posts have increased by 9 due to an Acute Care Practitioner post being converted to a Clinical Fellow post in ED, a new Senior Clinical Fellow post being added in O&G and the right sizing of the T&O Clinical Fellow establishment to support activity at Newark Hospital.

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 PA per trainee

### Exception reports From May 2023 (with regard to working hours)

The data from 1<sup>st</sup> May 2023 to 31<sup>st</sup> July 2023 shows there have been 37 exception reports in total, 28 related specifically to safe working hours while 4 were related to educational issues, 4 related to service support and 1 related to the rota pattern.

Four 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 11 exception reports in May 2023, 9 in June 2023 and 17 in July 2023.

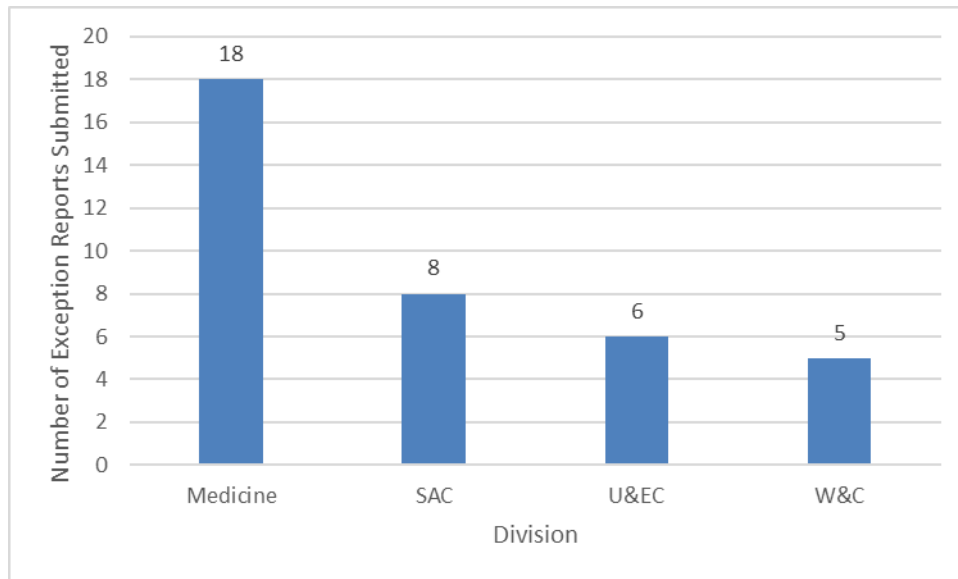
Of the 28 exception reports relating to safe working hours 25 were due to working additional hours and 3 were due to inability to take natural breaks.

Of the total 37 exception reports, 35 have been closed, with 8 being unresolved due to the doctor in training needing to accept the outcome. 2 reports are still pending both of which were submitted in July 2023.

For the exception reports where there has been an initial meeting with the supervisor the median time to first meeting is 8 days. Recommendations are that the initial meeting with the supervisor should be within 7 days of the exception report. In total 20 (54%) of all exception reports either had an initial meeting beyond 7 days or have not had an initial meeting. Reminders are now sent automatically to the Educational Supervisors listed by the Trainee to respond to the exception report. These reminders are sent regularly until the reports are responded to. For the more straight forward exception reports, the Medical Workforce Team will respond, however, often further information is needed from the Educational Supervisor to complete the response.

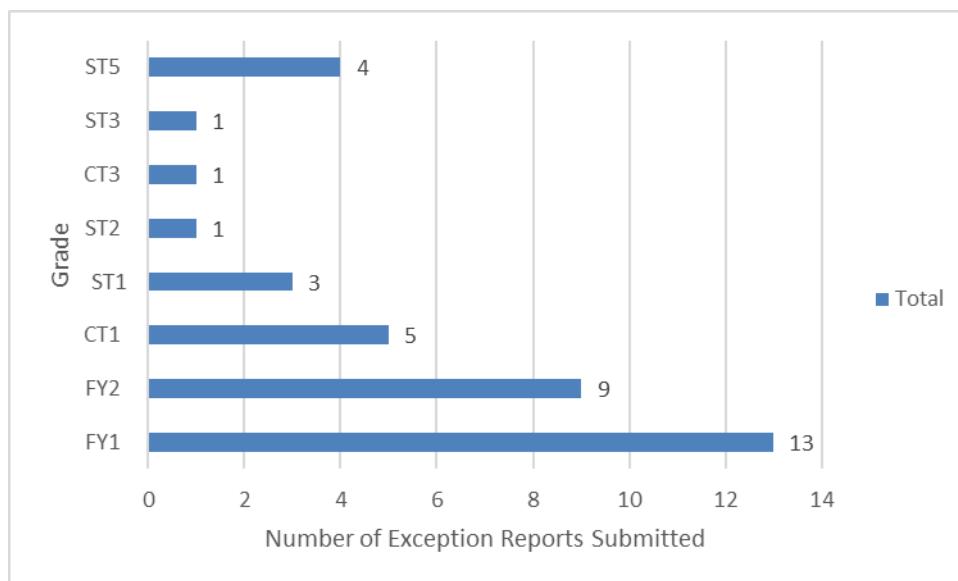
Where an outcome has been suggested there are 15 (43%) with time off in lieu (TOIL) totaling 17 hours, 14 (40%) with additional payment totaling 14 hours and 10 minutes at normal hourly rate and 6 hours 5 minutes at premium rate and 6 (17%) with no further action.

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. As most of the trainees will be leaving the Trust at the beginning of August, it is likely that most of the TOIL will be converted to payment.



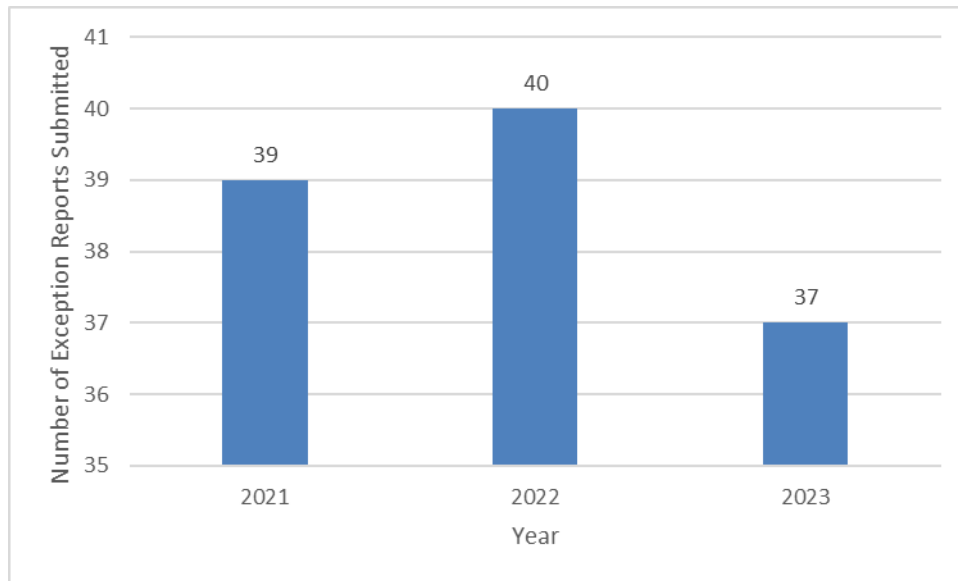
**Figure 1. Exception reports by Division for Trainees**

Figure 1 shows that the majority of the exception reports received during this period - 18 (49%) in total - are from postgraduate doctors working in the **Medicine Division**.



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

Figure 2 shows a high number of exception reports were submitted by the Foundation Year 1 and Foundation Year 2 Doctors. In total 13 (35%) of the exception reports have come from the Foundation Year 1 Doctors, 9 (24%) from the Foundation Year 2 Doctors, 9 (24%) CT1/2 and ST1/2 doctors and 6 (17%) from CT3/ST3+ doctors.

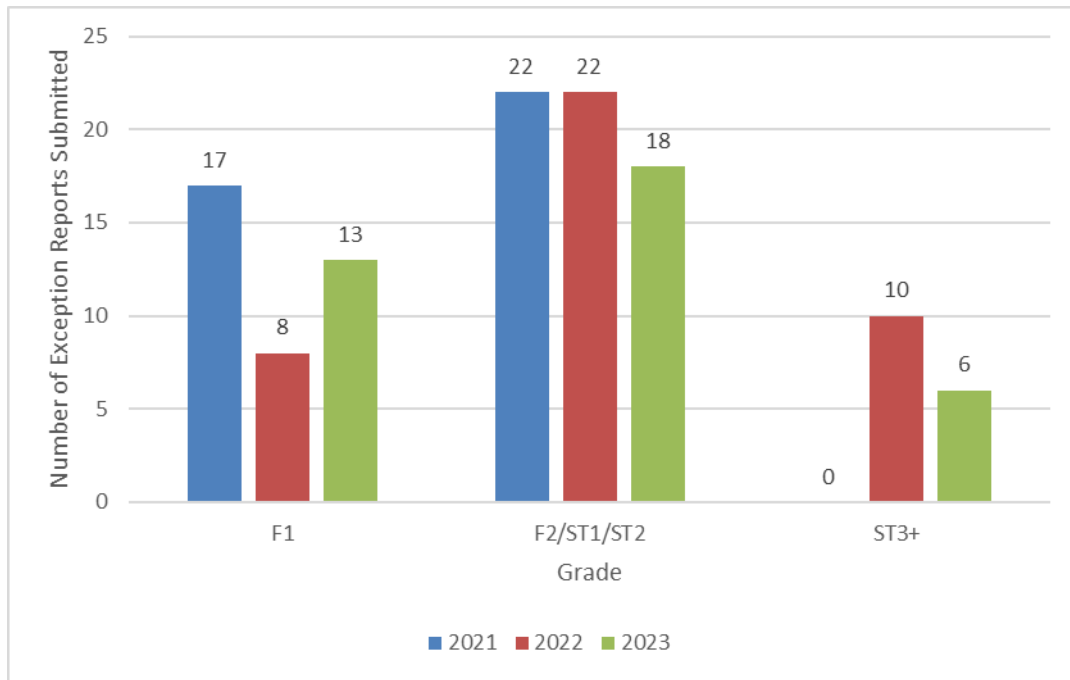


**Figure 3. Comparison of number of exception reports for the same period between 2021, 2022 and 2023**

Date	Grade and Specialty of Doctor	Details of Immediate Safety concern reported by the Trainee	Action Taken	Status of the Concern
05.07.23	F2 in Medicine	A doctor was absent due to sickness, leaving the cover for the night one doctor short. The doctor felt there were inadequate members of staff to safely cover the wards which they felt was a risk to patient safety.	This was managed by the HOOH team.	The report has been closed
05.07.23	F1 in Medicine	Similar to the above, the doctor felt there was inadequate members of staff to safely cover the wards.	The rota coordinator did attempt to fill the night shift.	The report has been responded to but is yet to be closed.
06.07.23	ST5 in Medicine	There were 2 juniors instead of 3 on the ward. At midnight there were still 30 or so jobs on the system still pending reviews. The team prioritized the ones which	Ensure that if a shift is understaffed, all the doctors and the HOOH coordinators working the shift are	The report has been closed

		<p>needed immediate patient reviews and dealt with the others later.</p> <p>A lack of communication about the staffing issues led to inability to plan the workload effectively and a lot of time was wasted trying to see if the doctor has gone to EAU by mistake etc</p>	<p>informed of the situation.</p>	
08.07.23	Clinical Fellow in Acute Medicine	<p>EAU has a total of 40+ patients at any given time, on weekends there are 2 junior doctors and 1 registrar.</p> <p>All patients are divided between the junior doctors and the registrar reviews sick patients, who have high NEWS scores.</p> <p>While reviewing so many post take patients and old patients, the doctor had 2 acutely sick patients, who had NEWS scores above 10.</p> <p>3/4 hours were spent on managing these 2 patients with the Registrar.</p> <p>All other jobs including the reviews of other patients had to be left and the doctor and the registrar failed to get a break.</p>	<p>The doctor stayed after hours to complete the post take jobs that were due but made sure all patients post take jobs were done to the best of their ability.</p>	<p>The report has been closed</p>

**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 less exception reports from all grades than in previous years.

### **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 208 doctors in training. As mentioned in the introduction, there are 27 vacancies currently where the Trust has not been allocated trainees by NHSE, the reasons for these posts not being filled were also mentioned in the introduction, 5 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.

This figure is made up of 9 actual vacancies evenly distributed across the Divisions with the remaining being small percentages of posts remaining unfilled due to Trainees working less than full time. In the majority of cases they are working 80% of a full time post.

The gaps will be filled by doctors on the bank where needed to support the rotas, which represents a cost pressure to the Trust.



The numbers of clinical fellows that have been recruited for the August changeover have been increased to allow more flexibility to cover trainee vacancies in August and to support the Trust over the winter period.

This will negate the need for as many agency doctors and bank doctors as have been used in previous years at a junior and middle grade level. The additional numbers recruited have been based on the need in previous years.

The high level data shows that the Clinical Fellows are currently over recruited by two posts.

**Qualitative information**

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. Although the number of reports that have not been responded to has reduced, this number still remains high. Dr Sathi plans to raise this issue at Grand Round on a regular basis to encourage Educational and Clinical Supervisors to respond to exception reports and establish what the barriers are to responding to the reports in a timely manner.

<b>Date of the Guardian Report</b>	<b>Number and Percentage of reports <u>not</u> responded to within 7 days</b>
May 2023 – July 2023	54% of all reports received 20 reports
February 2023 – April 2023	58% of all reports received 54 reports
November 2022 - January 2023	75% of all reports received 65 reports
August 2022 – October 2022	66% of all reports received 72 reports

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

Dr Sathi commenced in post on 1<sup>st</sup> June 2023. An induction to the role has taken place and there are a number of areas that Dr Sathi intends to focus on during his first few months in post.

Dr Sathi is keen to meet with the Trainees and has made arrangements to walk around the wards and attend the departmental junior doctors’ forums.

As previously reported, a Task and Finish Group has been established to manage the relocation of the doctors mess. This work is continuing, a walk around the new site for the mess took place on 28<sup>th</sup> April 2023 and a Business case was presented at the Capital Oversight Group meeting on

Thursday 25<sup>th</sup> May 2023. Further task and finish group meetings have taken place to progress this and a plan of the works has been shared with the aim of completing the work by December 2023.

Further periods of Industrial Action by Junior Doctors have taken place. The junior doctors are currently balloting regarding future industrial action. The ballot closes on 31<sup>st</sup> August 2023.

A great deal of work has been undertaken to review the current rotas, taking into account the exception reports that have been received in preparation for August 2023, this work has also incorporated a number of additional posts where bids have been successful. Further information to be provided in the next report.

The two surveys that have been completed by Trainees, those being the GMC Survey and the NETS Survey in addition to the Internal Quality Visit undertaken by the Medical Education and Medical Workforce. In addition a number of exit interviews were carried out with Clinical Fellows leaving the Trust. During these interviews concerns were raised relating to Acute Medicine. Essentially these concerns relate to the Medical Staff availability at night and over the weekend, the general organisation of the department, in particular the lack of handover and educational opportunities in that area. A number of Exception reports including one Immediate Safety Concern have also raised the lack of staff over night and the need to stay late to completed tasks. In addition, two Datix reports have been received relating to workload and staff shortages. The Director of Medical Education also raised some concerns with the department earlier on in the year following her visit to the department as part of the out of hours internal quality visit, however, it appears that actions that have been taken have not been sufficient to address the concerns.

The Director of Medical Education has arranged to meet with the department to discuss the concerns and agree an action plan to address these concerns. The Guardian of Safe Working will also be involved in the meeting and the monitoring of the action plan going forward.

## **Conclusion**

- Note the slight reduction in Exception reports from this time last year.
- Note that the largest number of exception reports are received from doctors in Medicine, however, a number of these exception reports relate to the out of hours shifts that are done in Acute Medicine.
- The automated system reminders are slightly improving the response rates of Clinical and Educational supervisors but not as much as was hoped.
- Dr Sathi has commenced in post as the new Guardian of Safe Working Hours.
- Rotas have been prepared and sent to the Trainees commencing in post in August, these rotas incorporate the additional training posts that the Trust has been successful in bidding for.

- Concerns have been raised by both trainees and clinical fellows relating to Acute Medicine which are being addressed by the Director of Medical Education with the involvement of the Guardian of Safe Working hours.

**Appendix 1**

**Issues/Actions arising from the Guardian of Safe Working Report to be taken forward**

<b>Action/Issue</b>	<b>Action Taken (to be taken)</b>	<b>Date of completion</b>
Junior Doctors mess to be relocated to the Deli Marche	Task and Finish Group in place involving key stakeholders to manage this transition	December 2023
Trainees to be informed of the email address for the Guardian of Safe Working inbox.	Communication to be sent to trainees	September 2023
Concerns have been raised by trainees relating to Acute Medicine	Meeting to be held with the Department to agree and action plan to address the issues that have been raised.	Action plan to have been produced with clear timescales by end September 2023