

Board of Directors Meeting in Public

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Subject:	Guardian of Safe Wo	nber 2022					
Prepared By:	Rebecca Freeman – Head of Medical Workforce						
	Jayne Cresswell – Medical Workforce Specialist						
Approved By:	David Selwyn - Medi	cal Director					
Presented By:	David Selwyn - Medi	cal Director					
Purpose							
			Approval				
		for assurance of safe		Х			
working as per the the 2016 Junior D		ns of Service (TCS) of	Update				
			Consider				
Strategic Object	ives						
To provide outstanding care	outstanding support health potential of our learn and improve			e better			
	х	х	Х	Х			
Identify which p	rincipal risk this repo	ort relates to:					
PR1 Significan	Х						
PR2 Demand t	2 Demand that overwhelms capacity X						
PR3 Critical sh	Critical shortage of workforce capacity and capability X						
PR4 Failure to							
	PR5 Inability to initiate and implement evidence-based Improvement and innovation						
_	Working more closely with local health and care partners does not fully deliver the required benefits						
PR7 Major disr	7 Major disruptive incident						
PR8 Failure to deliver sustainable reductions in the Trust's impact on climate change							
Committees/groups where this item has been presented before							
This item was presented at the Joint Local Negotiating Committee on 17th November 2022							
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Executive Summary

The Guardian of Safe Working Hours report provides information relating to the exception reports received between 1st August 2022 and 31st October 2022.

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 4 immediate safety concerns that were reported during this period, all 4 relate to ward cover, 3 are in Medicine and 1 in Trauma & Orthopaedics. All describe very busy shifts where the number of doctors on the ward has been reduced to 2 due to short term absence and in on case a doctor being called away from the wards to undertake other tasks.

Trust Board is asked to note:

- The increase in exception reports particularly from Foundation Year 1 doctors from the same quarter in 2021. This number of exception reports is expected from this group of trainees who are settling into their first job as a doctor in the NHS.
- That the new rota in Medicine was implemented in August and that a questionnaire will be sent to the junior doctors within the next 4 weeks asking for their views of the new rota. The rostering team are aiming to have a minimum of 3 doctors per ward and from the analysis of the rota coverage report, that is being achieved in most cases. There are some exceptions to this where there is short notice absence.
- That the Internal Quality Assessment has been completed by the Medical Education Team with support from the Medical Workforce Team and any actions relating to the safe working of the trainees and the Clinical Fellows will be shared in the next guardian of safe working report.

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Introduction

This report provides an update on exception reporting data, from 1st August 2022 to 31st October 2022. 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, 208 postgraduate doctors in training have been allocated to the Trust by Health Education East Midlands (HEEM). The Trust has an establishment of 228 trainees posts, so this year there are 20 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, not passing their exams, doctors leaving the training programme or there not being enough trainees following a particular training pathway to fill the posts across the country. Further information is included in the vacancies section.

High level data

Number of doctors in training (total):	208
Number of doctors in training on 2016 TCS (total):	208
Number of training posts unfilled by a doctor in training:	20
Number of unfilled training posts filled by a clinical fellow/locum:	3
Total number of non-training doctors including teaching fellows:	73
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 August 2022 (with regard to working hours)

The data from 1st August 2022 to 31st October 2022 shows there have been 109 exception reports in total, 106 related specifically to safe working hours while 2 were related to educational issues 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 2.

By month there were 24 exception reports in August 2022, 40 in September 2022 and 45 in October 2022.

Of the 106 exception reports relating to safe working hours, 101 were due to working additional hours, 2 were due to natural breaks and 1 was due to rest.

Of the total 109 exception reports 70 (64%) have been closed with 39 (36%) still open and all 39 of these are overdue. Of the 39 overdue exception reports, 33 are still waiting for the initial meeting to take place, the other 6 are unresolved.

For the exception reports where there has been an initial meeting with the supervisor the median time to first meeting is 6 days. Recommendations are that the initial meeting with the supervisor should be within 7 days of the exception report. In total 72 (66%) 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 52 (68%) with time off in lieu (TOIL), 23 (30%) with additional payment and 1 (2%) 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 doctors record or any payment is made.

			No. ERs carried			
ER relating to:	Specialty	Grade	over from last report	No. ERs raised	No. ERs closed	No. ERs outstanding
Immediate	Acute Medicine	FY2	0	1	0	
patient safety	General medicine	FY1	0	2	1	
issues	Surgical specialties	FY2	0	1	1	
issues	Trauma & Orthopaedic Surgery	FY2	1	0	0	
Total			1	4	. 2	
	Accident and emergency	ST5	4	0	0	
	Acute Medicine	CT1	0	6	6	
	Acute Medicine	CT2	2	0	2	
	Acute Medicine	CT3	1	3	1	
	Acute Medicine	FY2	0	2	0	
	Anaesthetics	FY1	0	1	0	
	Diabetes & endocrinology	FY1	0	5	2	
	Gastroenterology	FY1	1	2	3	
	General medicine	CT1	0	2	0	
	General medicine	FY1	10	44	. 27	•
	General medicine	FY2	1	1	1	
	General medicine	ST1	1	6	3	
	General medicine	ST6	3	0	1	
	General surgery	FY1	0	2	1	
	Geriatric medicine	FY1	0	2	1	
No. relating to	Haematology	CT1	1	0	0	
nours/pattern	Obstetrics and gynaecology	FY1	2	0	0	
	Obstetrics and gynaecology	ST1	1	0	1	
	Obstetrics and gynaecology	ST4	1	0	1	
	Otolaryngology (ENT)	ST1	0	1	0	
	Paediatrics	CT1	0	1	1	
	Paediatrics	FY1	0	2	0	
	Paediatrics	FY2	1	0	1	
	Paediatrics	ST2	3	0	3	
	Paediatrics	ST4	3	0	0	
	Paediatrics	ST6	0	2	0	
	Respiratory Medicine	FY1	1	0	1	
	Surgical specialties	FY1	4	12	5	
	Surgical specialties	FY2	0	4	. 4	
	Trauma & Orthopaedic Surgery	FY2	4	6	1	
	Trauma & Orthopaedic Surgery	ST1	0	3	0	
	Trauma & Orthopaedic Surgery	ST7	8			
Total			52	107	66	
	Anaesthetics	CT1	1			
No. relating to	General medicine	FY2	0			
educational	Obstetrics and gynaecology	FY2	0			
opportunities	Paediatrics	ST4	1			
	Trauma & Orthopaedic Surgery	FY2	1			
Total		, · -	3			
	Trauma & Orthopaedic Surgery	FY2	1			
Total			1			

Table 1. Exception Reports for Working Hours by Grade and Division

^{*}Acute Medicine shifts involve doctors from the Medical Division

NHS Foundation Trust

The majority of the exception reports received during this period - 73 (67%) in total - are from postgraduate 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 73 exception reports, 11 were whilst doing acute medicine shifts and 62 whilst doing specialty specific or ward-based work in Medicine. (Figure 1).

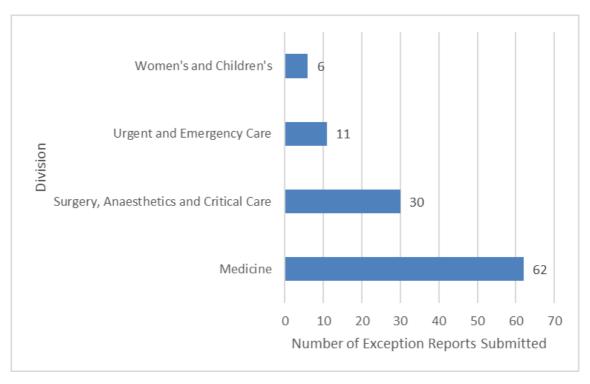


Figure 1. Exception reports by Division for Trainees

In total 70 (64%) of the exception reports have come from the Foundation Year 1 Doctors, 15 from the Foundation Year 2 Doctors, 19 from the CT1/2 and ST1/2 doctors, 3 from CT3 doctors and 2 from the ST4+ Trainees. (Figure 2).

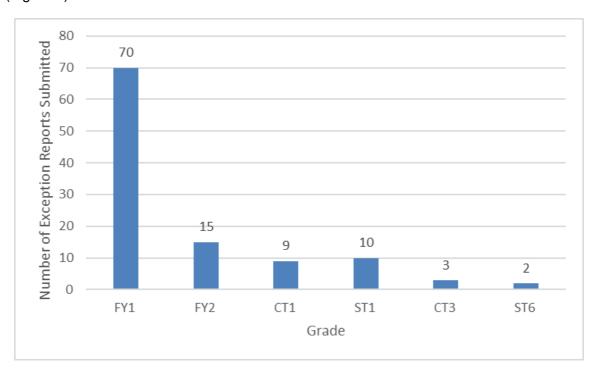




Figure 2. Exception reports by Grade for Trainees

Figure 2 shows that there has been a high number of exception reports received from Foundation Year 1 doctors which is to be expected as this is their first placement as a doctor in the NHS and history has shown that Foundation Year 1 doctors tend to stay after the end of their working day to complete tasks. It is likely that this number will reduce in the next report as the doctors learn more about prioritising tasks.

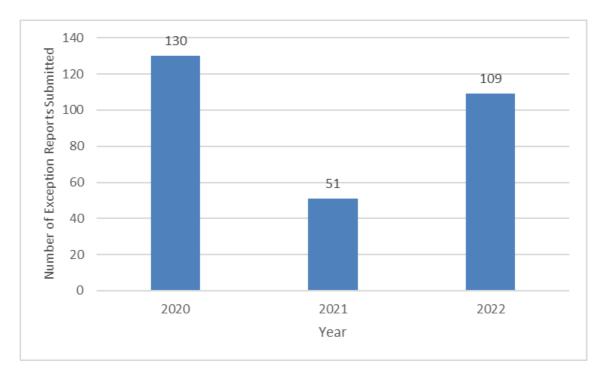


Figure 3. Comparison of number of exception reports for the same period between 2020, 2021 and 2022

Before the Pandemic, in 2018 for the same quarter, this number was 66 and in 2019 it was 91.

Date	Grade and	Details of Immediate Safety	Action Taken	Status of the
	Specialty of	concern reported by the		Concern
	Doctor	Trainee		
15.09.22	F2 Trauma &	Worked two hours more than	Registrar and on call	The exception
	Orthopaedics	scheduled as the twilight	consultant were made	report was closed.
		doctor did not arrive, so was	aware. Time off in lieu	
		covering ED and the wards.	was given to the	
		Very busy shift	doctor.	
04.10.22	F1 Medicine	Worked an additional hour. A	A discussion was held	The exception
		consultant was on leave and	with the doctor and	report was closed
		the registrar had to spend	payment was given for	
		time with the Medical	working the extra hour	
		Examiner and was not	worked.	
		available. Busy shift.		

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06.10.22	F1 Medicine	Worked overtime due to ward	A discussion was held	On the system the
		pressures and staffing issues.	with the Head of	concern remains
		Missed usual train home as	Service and time off in	unresolved.
		worked an additional hour	lieu given to the doctor.	
27.10.22	F2 Medicine	Stayed late due to staffing on	A discussion was held	The exception
		the ward. One doctor was	with the supervisor and	report was closed.
		absent. Additional support	Head of Service. Time	
		was requested which arrived	off in lieu was given to	
		at 2pm.	the doctor.	

Table 2. Immediate Safety Concern Concerns Raised

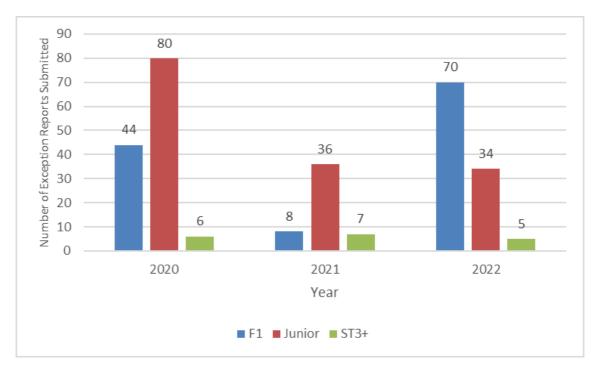


Figure 4. Number of Exception reports by doctors by grade for the same quarter between 2020, 2021 and 2022.

Figure 4 shows that this year there have been more exception reports from the Foundation Year 1 doctors than in 2021, for other trainees the numbers remain within a consistent pattern.

Exception Reports from Clinical Fellows

There are 73 Clinical Fellows and other non-training doctors. 58.75% are male and 41.25% are female. During this quarter there have been 8 exception reports received from Clinical Fellows. 4 reports were from the doctors in Acute Medicine, 2 were from doctors in Medicine and 2 were from doctors in the Emergency Department (ED). 6 reports were due to working additional hours and 2 were due to missing breaks, both of these were in ED. For those that worked additional hours, they worked an average of an additional hour and 15 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.



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 guarter.

Vacancies

In August the Trust was allocated 208 doctors in training. 53.5% are female and 46.5% male. As mentioned in the introduction, there were 20 vacancies in August where the Trust had not been allocated trainees by HEEM, the reasons for these posts not being filled were also mentioned in the introduction, 3 of the vacancies were filled by Clinical Fellows and an additional 4 vacancies have subsequently been recruited to. Two further posts have been offered to successful candidates. Of the remaining vacancies, Anaesthetics/Critical Care have 3 vacancies and Trauma & Orthopaedics also have 3 vacancies.

It is important to note that there were only three vacancies within the Medical specialties at the changeover in August which is a considerable reduction on previous years, one of these vacancies has since been filled.

These remaining gaps will be filled by doctors on the bank.

Qualitative information

The number of exception reports made by the more Senior trainees level still remains low with 5 being reported during this period. Although the overall number of exception reports has increased particularly amongst the F1 doctors, the hospital has remained extremely busy, therefore it is felt that there is still under reporting. 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. In addition, the median time to the first meeting is 6 days which has also increased.

Date of the Guardian Report	Number and Percentage of reports
	not responded to within 7 days
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
August 2021 – October 2021	52% of all reports received
	15 reports

Table 3 Exception Reports not responded to within 7 days



As described in the previous report a great deal of work was undertaken within the Medical Division to review the rotas for the more junior postgraduate trainees and the Clinical Fellows. This new rota has been implemented from August 2022. A report has also been developed showing the coverage of junior doctors across the wards on a daily basis and this shows that in most areas there are 3 doctors on each ward on a daily basis. The rota coordinators aim to ensure there are a minimum of 3 doctors on each ward and where the number falls below 3 where possible they will move a doctor from another ward to provide additional support. The rota coordinators will prospectively review the rotas for the weeks ahead to ensure that the minimum of 3 is maintained.

Both Trauma & Orthopaedics and Obstetrics & Gynaecology have made slight changes to the shifts on their rotas and the new rotas will be implemented from December 2022. Paediatrics are still in the process of reviewing their rota.

The Guardian of Safe Working has visited a number of wards in Medicine and has noticed that despite there being an increase in the number of doctors available, the doctors are still finding the volume of work difficult to manage. Whilst it is appreciated that the Trust has been particularly busy, on observing the doctors on the ward, the Guardian was particularly concerned about the doctors' organisational skills and the lack of team work amongst some of the junior doctors on the wards. This observation has also been made by the Clinical Chair in Medicine. The more senior trainees are working with those at a junior level to encourage them to be more organised and to work as a team to enable them to complete the jobs that they need to do in a timely manner.

The internal Quality Assessment was carried out with members of the Medical Education and Medical Workforce team. This is an annual event where the team ask trainees and Clinical Fellows about their experience as a junior doctor at the Trust. Exception reporting was raised and it was very clear that whilst doctors know how to exception report and have the appropriate access to exception report, they often choose not to exception report.

It has also been reported that there is one area that is discouraging doctors from exception reporting. This will be captured in the full report of the Internal Quality Assessment. This has been explicitly discouraged in separate communication from the Clinical Chairs, GoSW and MD.

The Medical Education Team are also keen to ensure that an exit interview is undertaken with trainees to find out about their experience as a Trainee at the Trust. Although this is currently carried out with some of the Foundation Programme doctors and with all of the Clinical Fellows, an exit interview isn't undertaken with all trainees due to resources. This is currently being considered by the Medical Education Team to develop a suitable quality feedback process.



The Guardian of Safe Working will be attending the Guardians conference on 28th November 2022

Conclusion

Trust Board is asked to:

- Note the increase in exception reports particularly from F1 doctors from the same quarter in 2021.
- Note that the new rota in Medicine was implemented in August and that a questionnaire will be sent to the junior doctors within the next few weeks asking for their views of the new rota.
- Note that the Internal Quality Assessment has been completed and any actions relating to the safe working of the trainees and clinical Fellows will be shared in the next report.



Appendix 1 Issues/Actions arising from the Guardian of Safe Working Report

Action/Issue	Action Taken (to be taken)	Date of completion
Feedback from Junior Trainees in Medicine regarding the new rota	Act on any relevant feedback from the questionnaires sent to the junior trainees in Medicine regarding the new rota.	31 st January 2023
Exception reports being responded beyond the first 7 days.	Remind the supervisors on a weekly basis of the exception reports that are outstanding and require action, escalating those that have not been responded to within the required 7 days to the Head of Service/Service Director	ongoing
Feedback from the Internal Quality Assessment	Act on any relevant feedback from the Internal Quality Assessment report.	31st January 2023