

Meeting Title	Board of Directors		
Date	20.01.22	Agenda item	Bo.1.22.22

GUARDIAN OF SAFE WORKING HOURS DOCTORS AND DENTISTS IN TRAINING QUARTER 2 2021/22

Presented by	Dr Ray Smith Chief Medical Officer	
Author	Dr Joanna Glascodine Guardian of Safe Working Hours	
Lead Director	Dr Ray Smith Chief Medical Officer	
Purpose of the paper	Provide assurance that doctors and dentists in training are working safe hours	
Key control	High Level Control for Objective 1 & 3	
Action required	To note	
Previously discussed at/informed by		
Previously approved at:	Committee/Group	Date
	People Academy	24.11.21
Key Options, Issues and Risks		
The 2016 junior doctor contract requires the Guardian of Safe Working Hours to submit a quarterly report to the Board to provide assurance that doctors and dentists in training are working safe hours. Information on exception reporting, work schedule reviews, rota gaps and fines levied will be presented. This report covers the period 1 July – 30 September 2021.		
Analysis		
Trainees submit exception reports if working beyond contracted hours or educational opportunities are missed. The Guardian monitors hours-related reports, while the Director of Education monitors training-related reports.		
In Quarter 2 there were 25 exception reports. 21 of these were related to hours/working patterns and 1 was education related. 3 exception reports from FY1s were relating to the service support available and 1 of those which reported this leading to a patient safety issue.		
In total, 26.75 additional hours were reported by junior doctors this quarter with the most reported hours coming from medical specialities.		
Recommendation		
Palliative medicine remains the only non-compliant rota (due to weekend working pattern). This has been discussed at the previous junior doctor forum with trainee representatives from Palliative Care and the BMA. The trainees in post are happy with their current pattern whilst we work to find a long-term solution (note this pattern is the same throughout the region).		

Meeting Title	Board of Directors		
Date	20.01.22	Agenda item	Bo.1.22.22

Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients			g			
To deliver our financial plan and key performance targets			g			
To be in the top 20% of NHS employers					g	
To be a continually learning organisation				g		
To collaborate effectively with local and regional partners					g	
The level of risk against each objective should be indicated. Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Low		Moderate	High	Significant	
	Risk (*)					
Explanation of variance from Board of Directors Agreed General risk appetite (G)						

Benchmarking implications (see section 4 for details)	Yes	No	N/A
Is there Model Hospital data relevant to the content of this paper?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there any other national benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the Trust an outlier (positive or negative) for any benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Risk Implications (see section 5 for details)	Yes	No
Corporate Risk register and/or Board Assurance Framework Amendments	<input type="checkbox"/>	<input type="checkbox"/>
Quality implications	<input type="checkbox"/>	<input type="checkbox"/>
Resource implications	<input type="checkbox"/>	<input type="checkbox"/>
Legal/regulatory implications	<input type="checkbox"/>	<input type="checkbox"/>
Diversity and Inclusion implications	<input type="checkbox"/>	<input type="checkbox"/>
Performance Implications	<input type="checkbox"/>	<input type="checkbox"/>

Regulation, Legislation and Compliance relevance	
NHS Improvement: (please tick those that are relevant)	
<input type="checkbox"/> Risk Assessment Framework	<input type="checkbox"/> Quality Governance Framework
<input type="checkbox"/> Code of Governance	<input type="checkbox"/> Annual Reporting Manual
Care Quality Commission Domain: Choose an item.	
Care Quality Commission Fundamental Standard: Choose an item.	
NHS Improvement Effective Use of Resources: Choose an item.	
Other (please state):	

Meeting Title	Board of Directors		
Date	20.01.22	Agenda item	Bo.1.22.22

Relevance to other Board of Director's academies: (please select all that apply)			
People	Quality	Finance & Performance	Other (please state)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Meeting Title	Board of Directors		
Date	20.01.22	Agenda item	Bo.1.22.22

QUARTER 2

1 PURPOSE/ AIM

To provide a quarterly update report to give assurance that doctors and dentists in training are working safe hours.

2 BACKGROUND/CONTEXT

The 2016 junior doctor contract requires the Guardian of Safe Working Hours to submit a quarterly report to the Board to provide assurance that doctors and dentists in training are working safe hours.

3 PROPOSAL

Information on exception reporting, work schedule reviews, rota gaps and fines levied will be presented. This report covers the period 1 July – 30 September 2021. No fines were levied within this period.

4 RISK ASSESSMENT

Risks have been identified but actions have been taken and continue to be taken to mitigate against the risk.

5 RECOMMENDATIONS

There were less exception reports and extra hours claimed for in this quarter most likely due to the new rotation and new starters not being familiar with the system. A reminder has gone out to trainees about exception reporting.

There is now a new rota where a 'team of the week' for Ward 29 (downstream covid) who will see patients every weekday hopefully creating a safer environment for both staff and patients alike.

The highest amount of overtime is in Medicine with the majority from General Medical wards. This is partly to do with the inconsistency of senior cover on the main general medicine ward.

Palliative medicine remains the only non-compliant rota (due to weekend working pattern). The trainees in post are happy with their current pattern.

There appears to be an improvement in Foundation doctors having their self-directed time compared with the previous quarter – I will continue to monitor this and have encouraged juniors to exception report if they are unable to take it.

Meeting Title	Board of Directors		
Date	20.01.22	Agenda item	Bo.1.22.22

6	Appendices
----------	-------------------

Introduction

The 2016 junior doctor contract requires the Guardian of Safe Working Hours to submit a quarterly report to the board to provide assurance that doctors and dentists in training are working safe hours. Information on exception reporting, work schedule reviews, rota gaps and fines levied will be presented. This report covers the period 1 July – 30 September 2021 which occurred during the covid-19 pandemic.

Exception reports

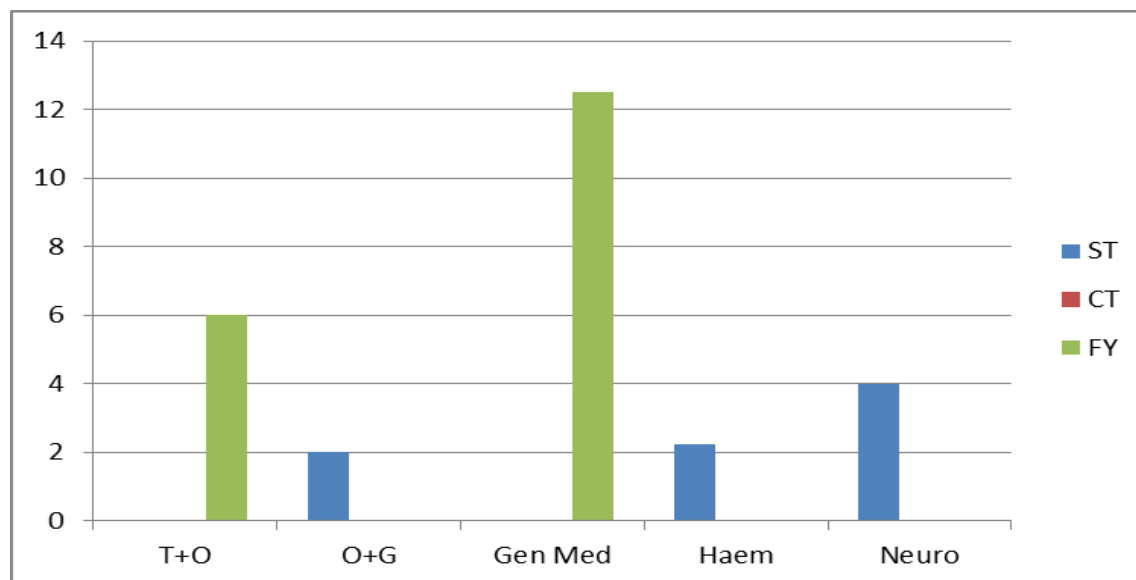
Trainees submit exception reports if working beyond contracted hours or educational opportunities are missed. The Guardian monitors hours-related reports, while the Director of Education monitors training-related reports. In Quarter 2 there were 25 exception reports. 21 of these were related to hours/working patterns and 1 was education related (missed FY1 teaching). There were 3 reports regarding service support all from new FY1 doctors on Medical Specialities. 1 FY1 felt that the lack of cover on one of the covid wards out of hours and the lack of awareness of which senior was responsible led to a patient safety issue. There is now a rota in place identifying senior medical cover on a day to day basis. The situation will be monitored over coming weeks to evaluate success or otherwise.

Table 1: Number of exception reports by specialty July - September 2021.

Exceptions by Speciality	Hours/work pattern	Educational	Service support / patient safety
General Medicine	8	1	3
Plastics	5	0	0
O+G	2	0	0
Neurology	2	0	0
Haematology	2	0	0
Orthopaedics	2	0	0

Meeting Title	Board of Directors		
Date	20.01.22	Agenda item	Bo.1.22.22

Figure 1: Exception reports (hours) by specialty and training grade July – September 2021



Work schedule reviews

Every trainee agrees a work schedule with their educational supervisor. A work schedule review takes place when changes are needed to ensure safe working hours or to provide better training opportunities. No work schedule changes happened during this quarter.

Rota gaps

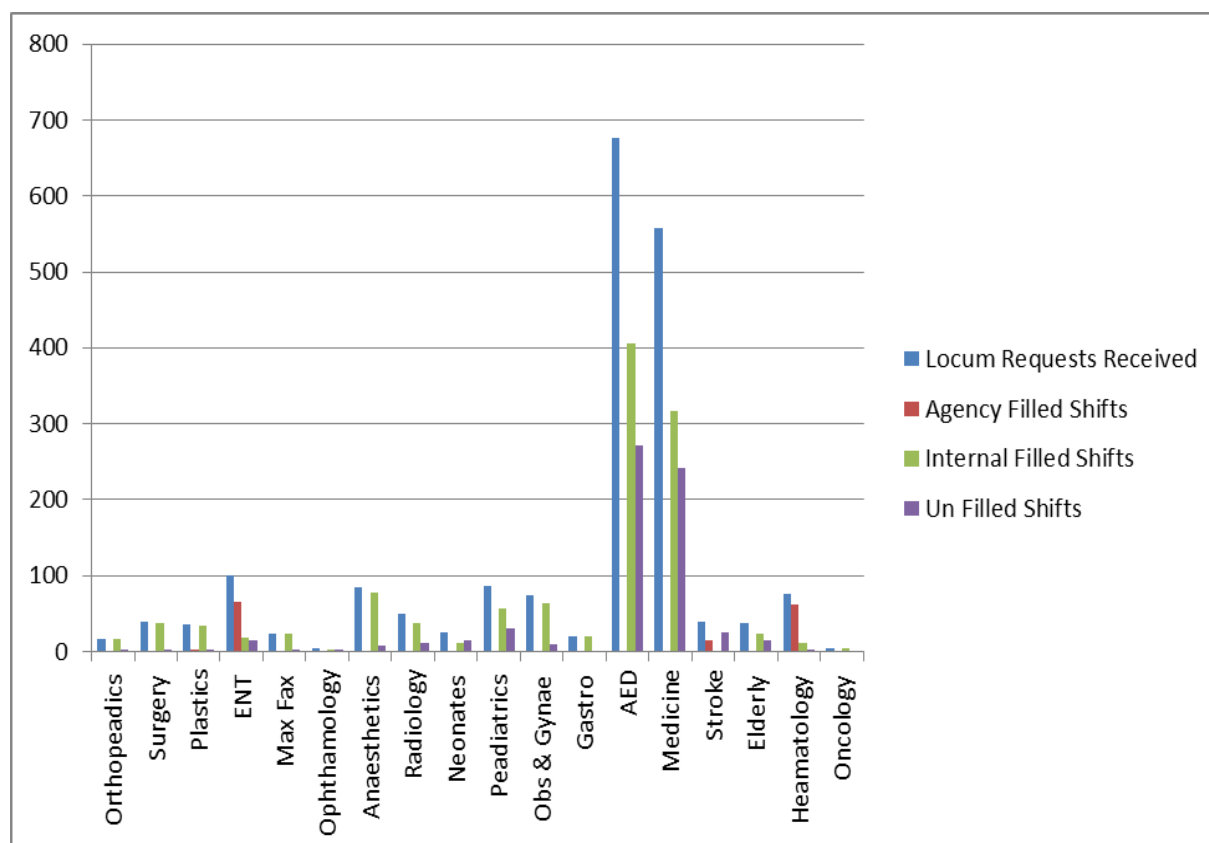
A gap on a rota results from the post not being filled or from long term sickness. Gaps may be filled by doctors who are not in training. We currently employ 60 fellows (27 junior level and 33 registrar level).

Locum bookings

Rota gaps may be filled by bank or agency locums via the flexible workforce team. There continues to be high levels of requests for locums within many departments with the highest requests from ED and Medicine both with more requests than the previous quarter. Between them they requested 1235 locums with 514 shifts remaining unfilled. Some representatives at the junior doctor forum felt that the locum pay rates were not enough to attract people to do the shift. HR has kindly looked into the rates and compared with local trusts and those specialties that fall below will escalate in the hope for increased locum pay and in turn higher fill rate. Note - costs of locums per department were not available at the time of writing the report.

Meeting Title	Board of Directors		
Date	20.01.22	Agenda item	Bo.1.22.22

Figure 2: Locum shifts by department July – September 2021



Fines

The Guardian levies a fine against a department if contract rules on hours or breaks are broken. Some is paid to affected doctors with the remainder being disbursed via the Junior Doctor Forum to improve the working lives of junior doctors during their time in Bradford. No fines have been levied in this quarter.

Issues arising and actions taken

One of the main education related exceptions we have had in recent times was around self-directed time (SDT) for Foundation doctors which is now mandatory for both FY1 and FY2 doctors. The number of reports for this has reduced which in part is due to SDT being part of some of the rotas now but we have asked the junior doctor reps to remind people to exception report if they are not getting that time.

The Palliative medicine rota remains the only non-compliant rota. This has been discussed at the Junior doctor forum and in previous Guardian reports. There are no concerns and it will continue to be discussed whenever new doctors join the rota.

The highest number of extra hours reported was from General Medicine Foundation Doctors. Most hours coming from doctors on Ward 17 which has had some inconsistency with both

Meeting Title	Board of Directors		
Date	20.01.22	Agenda item	Bo.1.22.22

senior and junior cover leading to the juniors staying late and missing breaks. I have spoken to one of the Consultant Team covering ward 17 and this is an ongoing issue they are trying to resolve within their own team. I will continue to monitor the exception reports from the team on the ward.

Summary

- There were several concerns raised about the cover on Ward 29 (downstream covid) with inconsistent cover at a both junior and senior level. There is now a new rota where a 'team of the week' who will see patients every weekday hopefully creating a safer environment for both staff and patients alike.
- There were less exception reports and extra hours claimed for in this quarter most likely due to the new rotation and new starters not being familiar with the system. A reminder has gone out to trainees about exception reporting.
- The highest amount of overtime is in Medicine with the majority from General Medical wards. This is partly to do with the inconsistency of senior cover on the main general medicine ward.
- Palliative medicine remains the only non-compliant rota (due to weekend working pattern). The trainees in post are happy with their current pattern.
- There appears to be an improvement in Foundation doctors having their self-directed time compared with the previous quarter – I will continue to monitor this and have encouraged juniors to exception report if they are unable to take it.