

Meeting Title	Board of Directors		
Date	10 November 2022	Agenda item	Bo.11.22.39

GUARDIAN OF SAFE WORKING HOURS DOCTORS AND DENTISTS IN TRAINING QUARTER 2 2022-23

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	For information	
Previously discussed at/informed by		
Previously approved at:	Committee/Group	Date
	People Academy – PA.10.22.15	26.10.22
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 2022.		
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 73 exception reports. 64 of these were related to hours/working patterns, 5 were education related and 4 exception reports were relating to the service support available to the doctor. In addition 6 reports were flagged as an immediate safety concern.		
In total, 70.5 additional hours were reported.		
Recommendation		
Palliative medicine remains the only non-compliant rota (due to weekend working pattern). The trainees in post are happy with their current pattern. This will be discussed every time a new trainee rotates and approved at JDF.		
The highest number of additional hours claimed this quarter was from General Surgery FY1 doctors. This quarter covered the changeover period in August when the new rota for Foundation doctors in Surgery was implemented. I can review if this has helped workload in the next quarter.		
All 6 patient safety concerns came from one Plastics trainee who felt the workload during on-call could lead to a patient safety issue. This has been discussed with the trainee, their supervisor and clinical lead.		

Meeting Title	Board of Directors		
Date	10 November 2022	Agenda item	Bo.11.22.39

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):

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	10 November 2022	Agenda item	Bo.11.22.39

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 2022. 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

Palliative medicine remains the only non-compliant rota (due to weekend working pattern). The trainees in post are happy with their current pattern. This will be discussed every time a new trainee rotates and approved at JDF. One potential solution has been proposed sharing on-calls with Airedale and will be looked into to see if this is feasible.

The highest number of additional hours claimed this quarter was from General Surgery FY1 doctors. This quarter covered the changeover period in August when the new rota for Foundation doctors in Surgery was implemented. I can review if this has helped workload in the next quarter.

All 6 patient safety concerns came from one Plastics trainee who felt the workload during on-call could lead to a patient safety issue. This has been discussed with the trainee, their supervisor and clinical lead.

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 2022.

Meeting Title	Board of Directors		
Date	10 November 2022	Agenda item	Bo.11.22.39

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 73 exception reports. 64 of these were related to hours/working patterns, 5 were education related and 4 exception reports were relating to the service support available to the doctor. In addition 6 reports were flagged as an immediate safety concern. This is a reduction in report compared with quarter 1 which may be linked to the changeover as the new trainees gets settled into their new jobs.

The highest number of reports was from General Surgery FY1 doctors. These were all for hours worked and they reported the most overtime with 32.75 hours between the 33 reports. In August a new rota was implemented for the General Surgical FY1s so hopefully this will help to improve the number of reports. This will be reviewed in the analysis next quarter.

Only one trainee felt there were patient safety concerns. This trainee felt that the out of hours work covering Plastics/ENT/OMFS was too busy and that one doctor could not cover all of this safely. There were no associated DATIX related to these shifts. I have spoken to the trainee, their supervisor and clinical lead to try and understand what the issues are.

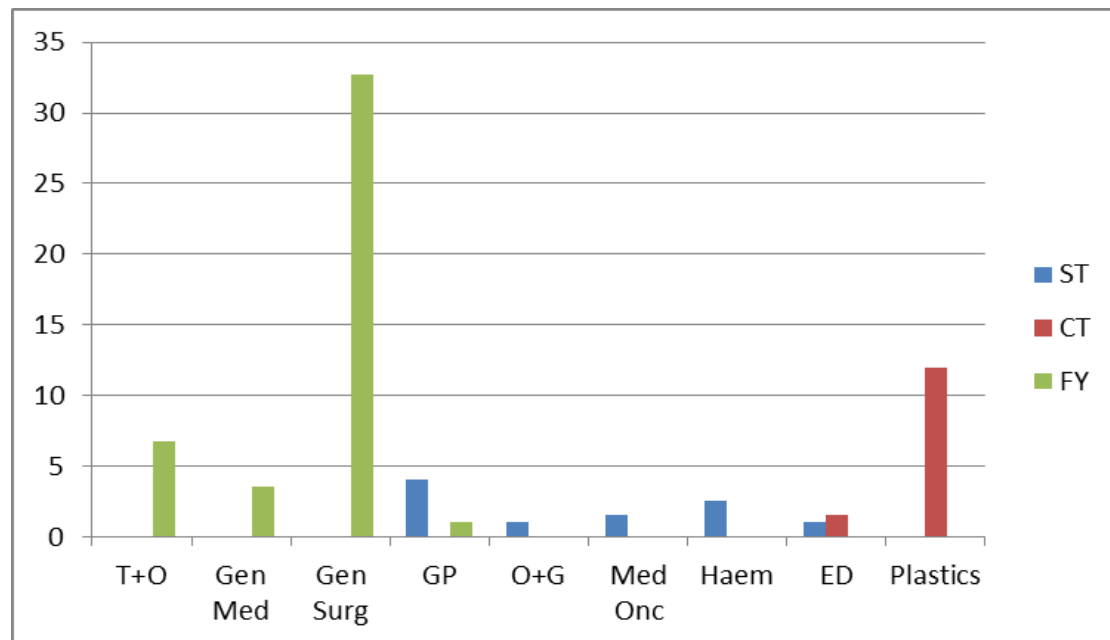
The 5 specialities with the most reports are shown below in table 1 and additional hours claimed by speciality and grade in Figure 1.

Table 1: Number of exception reports by top 5 specialties July – September 2022.

Exceptions by Speciality	Hours/work pattern	Educational	Service support	Patient safety
General Surgery	33	0	0	0
Plastics	7	4	0	6
General Medicine	5	0	4	0
T+O	5	0	0	0
GP	4	0	0	0

Meeting Title	Board of Directors		
Date	10 November 2022	Agenda item	Bo.11.22.39

Fig 1: Exception reports (hours) by specialty and training grade July – September 2022



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. There was no work schedule reviews this quarter.

Rota gaps

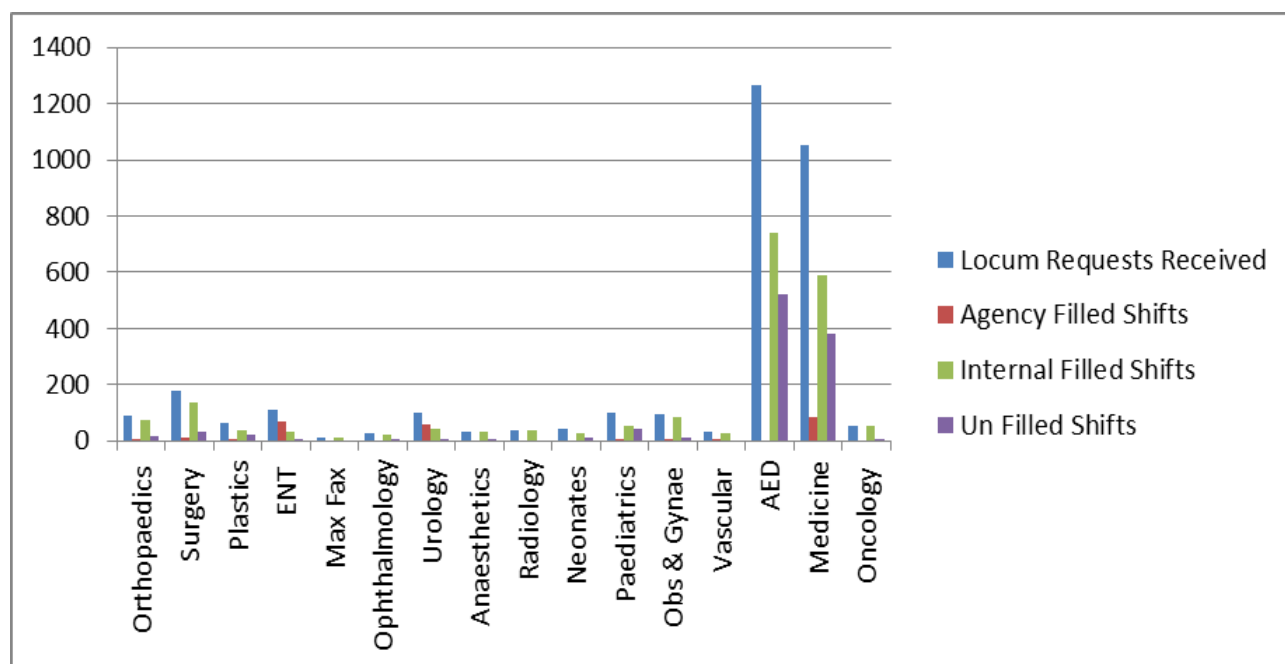
A gap on a rota results from the post not being filled or from long term sickness. Gaps may be filled by doctors who are not in training. We currently employ 60 fellows (27 junior level and 33 registrar level).

Locum bookings

Rota gaps may be filled by bank or agency locums via the flexible workforce team. This quarter there was an increase of 22% in locum requests with 1/3 of those remaining unfilled. The two departments requesting the highest numbers of trainee doctor locums were as always; the Emergency Department and Medicine (see figure 2).

Meeting Title	Board of Directors		
Date	10 November 2022	Agenda item	Bo.11.22.39

Figure 2: Locum shifts by department July – September 2022



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

The highest number of exception reports comes from Foundation Trainees. The highest number is from General Surgery and the most common reason cited is poor staffing / ward work busy so leaving late. The hope was that the new rota that started in August would help to reduce the pressure on the trainees so I would expect to see an improvement by the next quarter. This finding was fed back to the General Surgical team who felt the FY1 doctors were finding their feet and there were no other issues at present.

Only one trainee put in exceptions around patient safety and this was in Plastics. This was around the volume of work covering 3 specialities (Plastics / ENT / OMFS) out of hours. They felt that the length of time patients were waiting in ED for their input could lead to a patient safety issue. I have met with the trainee to discuss their concerns and have discussed with members of the Plastics team.

The February 2020 TCS requirement for maximum weekend frequency working of 1:3 has been achieved across all rotas with the exception of palliative medicine (Marie Curie Hospice) although there is agreement from the hospice, the trust, the guardian and trainees on the rota that this will continue and will remain under review. There has been one suggestion of shared on-call with Airedale and we will see if this is a workable option for trainees.

Meeting Title	Board of Directors		
Date	10 November 2022	Agenda item	Bo.11.22.39

Summary

- There was a 20% reduction in exception reporting this quarter which may be due to junior doctor changeover in August for most specialities.
- Patient safety reports came from one trainee in Plastics who was concerned over patient waiting times in ED.
- The highest amount of overtime is from FY1 doctors in General Surgery. A new rota has started in August and would hope to see a reduction in overtime and exception reporting next quarter.
- There has been an increase (22%) in request for locums this quarter with around 1/3 going unfilled. ED and Medicine remain the departments in need of most locums.
- Palliative medicine remains the only non-compliant rota (due to weekend working pattern). The trainees in post are happy with their current pattern whilst we work to find a long-term solution.