

Recommendation	<p>The Board is asked to: Read and Note this Annual Report from the Guardian of Safe Working</p>
<input type="checkbox"/> DECISION	
<input checked="" type="checkbox"/> NOTE	
Reporting to:	Trust Board
Date	27 th July 2017
Paper Title	2017 Report from the Guardian of Safe Working
Brief Description	<p>The new Contract for Junior Doctors provides the an opportunity for change for Trainees because, for the first time work schedules set out express contractual commitments for training, as well as service commitments.</p> <p>The Exception Reporting process allows Trainees to give the Guardian notice of working unsafe hours. However, it remains a concern that despite known understaffing in the Trust and comments regarding Trainees working beyond their scheduled hours, from various informal discussions and forums, that Exception Reporting remains low in this Trust.</p> <p>To date, the most useful information to the Guardian regarding safe working has been acquired through the Junior Doctor forums held throughout the Trust, her regular meetings with Medical Staffing and by attending the Educational Leads meetings organised by the Director of Medical Education. Medical Staffing have raised concerns regarding unsafe staffing levels.</p> <p>Of the reports provided to the Guardian through Exception Reporting there is no evidence that the current Foundation Year One trainees on the Contract have consistently felt unsafe or unsupported.</p> <p>The Guardian predicts increased reporting throughout the Trust as all Trainees move to the new Contract in August 2017.</p>
Sponsoring Director	Edwin Borman, Medical Director
Author(s)	Bridget Barrowclough
Recommended / escalated by	Nil In future to be considered by the Workforce Committee
Previously considered by	Nil In future to be considered by the Workforce Committee
Link to strategic objectives	VALUES INTO PRACTICE - Value our workforce to achieve cultural change by putting our values into practice to make our organisation a great place to work with an appropriately skilled fully staffed workforce

Link to Board Assurance Framework	If we do not get good levels of staff engagement to get a culture of continuous improvement then staff morale & patient outcomes may not improve (RR 423) Risk to sustainability of clinical services due to shortages of key clinical staff (RR 859)
Equality Impact Assessment	<ul style="list-style-type: none">● Stage 1 only (no negative impacts identified)● Stage 2 recommended (negative impacts identified)<ul style="list-style-type: none">● negative impacts have been mitigated● negative impacts balanced against overall positive impacts
Freedom of Information Act (2000) status	<ul style="list-style-type: none">● This document is for full publication● This document includes FOIA exempt information● This whole document is exempt under the FOIA

2017 Report from the Guardian of Safe Working

Author: Dr Bridget Barrowclough

Background

A new Contract for Junior Doctors came into effect on 3 August 2016. The Terms and Conditions of the Contract reflected the importance that Junior Doctors are fully trained in ways that are safe and fair.

Key features included:

- The provision of generic work schedules setting out the hours of work, the working pattern, the service commitments and the training opportunities in post, to be personalised early in the rotation.
- A robust electronic reporting system to enable trainees to report variances in the given schedule, in order to enable real time monitoring and compliance, and resolution of exceptions to working patterns, hours and training in a timely manner.
- the establishment of a new role, independent of management– the Guardian of Safe Working
 - to provide oversight of all Exception Reports (ER)
 - give assurance to the Board that doctors are rostered and working safe hours
 - identify to the Board any areas where there are current difficulties maintaining safe working hours and plans to address these

Guardian of Safe Working Report for Shrewsbury and Telford Hospital NHS Trust (SaTH) and the Shropshire Community Health NHS Trust

Summary of the current situation at SaTH

Since the report of March 2017, thirteen further Trainees have joined the 2016 Contract including GPVTS, Surgical and Paediatric trainees.

In August 2016 the majority of trainee doctors in the Trust will transition to or start on the 2016 Contract. All rotas are now 2016 compliant.

All work schedules have been issued to Trainees in preparation for when they start work in August.

Significant vacancies exist throughout the Trust.

The Guardian has received a total of 12 Exceptions Reports since December 2016

Current key data relating to the role are outlined below:

• Number of doctors / dentists in training (total):	196
• Number of doctors / dentists in training currently on 2016 TCS (total):	53
• Amount of time available in job plan for Guardian :	1 PA per week
• Amount of job-planned time for Educational Supervisors:	0.25 PAs per trainee
• Amount of job-planned time for Clinical Supervisors:	0.25 PAs per trainee

Activities of the Guardian in the current quarter

The Guardian has focused on educating the workforce regarding their respective roles and responsibilities under the 2016 Contract whilst continuing to champion Safe Working amongst the Trainees on the Contract.

Summary of the current situation at the Shropshire Community Health NHS Trust

The Guardian of Safeworking at SaTH continues to oversee exception reporting for the Psychiatry trainees with the Community Mental Health Trust on the new contract and advises that there have been no reports of deviation from their work schedules with effect to hours and/or support.

Exception reports (with regard to working hours and patterns of work)

Since the system was implemented on 7 December 2016 there have been 12 Exception Reports.

Three of these were investigated within the contractual timeline of 7 days.

One report remained open beyond 20 days due to the trainee failing to close the report despite agreeing the outcome. This report was not completed in timeframe due to failure of the supervisor to meet initially with the trainee.

A further report remains open as the outcome is unclear. A discussion was held within the Contractual timeframe with an electronic response copied to the Guardian via email due to inability to access the reporting system. The Guardian has intervened in an attempt to affect an outcome and will now escalate this to the Clinical Director.

Two reports were resolved with Time Off In Lieu (TOIL). Additional hours payment is being discussed for the current open report. One report required discussion with the Clinical Director in Medicine resulting in organisational change. A further report required correction of a work schedule.

Exception reports by department				
Specialty	No. exceptions carried over from last report	No. exceptions raised	No. exceptions closed	No. exceptions outstanding
Emergency Department	0	0	0	0
Medicine	0	5	5	0
Anaesthetics	0	0	0	0
Cardiology	0	0	0	0
Care of the Elderly	0	0	0	0
Diabetes & Endo	0	0	0	0
Psychiatry	0	0	0	0
Head & Neck	0	0	0	0
Obstetrics & Gynecology	0	4	4	0
Paediatrics	0	0	0	0
Pathology	0	0	0	0
Renal Medicine	0	0	0	0
Respiratory	0	0	0	0
Surgery	0	1	0	1
Trauma & Orthopaedics	0	2	2	0
Urology	0	0	0	0
Total	0	12	11	1*

*Discussed but remains open –no outcome agreed as yet

Exception reports by grade				
Specialty	No. exceptions carried over from last report	No. exceptions raised	No. exceptions closed	No. exceptions outstanding
F1	0	12	11	1
Total	0	12	11	1

Exception reports (response time)				
	Addressed within 48 hours	Addressed within 7 days	Addressed in longer than 7 days	Still open
F1	0	7	4	1
Total	0	7	4	1

Fines

No fines have been levied by the Guardian as a result of breaches to working hours or patterns

Work schedule reviews

One work schedule review, in response to an Exception Report, has been undertaken.

Staffing levels

A recent update from medical staffing advised of a 14.4% vacancy across the total workforce.

The Guardian is unable to advise the percentage of these vacancies filled by locums (short or long term) as data collated focuses on locum spend rather than fill rate.

With respect to the Junior doctors this figure will change with the August changeover, dependent on the number of junior doctors in training being allocated a placement at SATH, and whether those offered appointments require further training prior to commencing.

Medical staffing advise that last minute short term absences "often" go unfilled resulting in unsafe staffing levels. They are unable to provide exact figures for these events as the Trust does not have the software to capture and collate the data. The Guardian is unable to advise how departments manage these vacancies as that information is not gathered or collated. Medical staffing advise high absence rates due to sickness are creating challenges with maintaining safe staffing levels. They report an average of 42 episodes of sickness per month in the medical workforce over the past 12 months.

Challenges arising and actions to resolve issues

The implementation of the 2016 Contract has represented a considerable program of work with which the Guardian in SaTH has been involved since August 2016. Progress is being made, but the Guardian believes a number of challenges persist.

The Exception Reporting process

It is a concern that there have been few ERs submitted within the Trust. It is uncertain whether this continues to reflect a lack of clarity regarding the process or reluctance to report on the part of the Junior Doctors for fear of recrimination. Re-assurances have been made to the Trainees in the presence of the Guardian, by the Medical Director, Deputy Medical Director, Foundation Programme Director and Senior Colleagues.

Engagement with Junior Doctors

Junior doctor briefings offered by both the Guardian and the Medical Staffing have been poorly attended. The Guardian has, for now, ceased monthly drop in sessions due to lack of attendance. Offers to visit the Doctors' Mess at regular intervals were not taken up. It is hoped that a rapid communication system can be set up for the trainees to liaise directly with the Guardian. Access to the Guardian continues via her e-mail. The Guardian has been contacted by Trainees and is confident current Trainees on the Contract are able to contact her. Two further forums have been held since the last report and were well attended. Forums in all specialties continue throughout the Trust and the Guardian receives all minutes.

The Trust has encouraged Trainees to discuss any issues relating to safe working with their Clinical Supervisors at all times and has re-iterated it remains the trainees choice to report exceptions. The trainees are aware that many issues can be resolved locally with the Clinical Supervisor but that the Guardian will not be made aware of these unless they report using the Exception Report process.

Engagement with Senior Colleagues and Management

Engagement with Senior colleagues regarding the role of the Guardian and the process of exception reporting has been to the Guardian's satisfaction. The Guardian presented to Senior colleagues at DEEP, and has held a CPD event for all Clinical Supervisors also attended by managers. A live video recording of the CPD event is now available for viewing on the intranet. She has attended Clinical Governance meetings with medical staffing and has overseen Contract briefing sessions with medical staffing. A presentation has also been made to the Educational Supervisors.

Time allocation for the duties of the Guardian

The Guardian is challenged by the fragmented nature and diverse requirements of the role, and finds it difficult to consolidate all responsibilities into the allocated 4 hours per week.

Administrative support for the Guardian role

Recent discussions with the Medical Director have addressed concerns regarding some administrative tasks. A member of the Medical Staffing team has been allocated to assist the Guardian in following up on Exception Reports and addressing concerns raised by Senior colleagues and management in processing Exception Reports

Exception Reporting software

The Trust uses the Allocate software for Exception reporting. Since the last report Trust computers remain incompatible with Allocate. This is said to have caused delays on one occasion with the submission of an Exception Report. The IT department has advised they are waiting for the timetabling of an upgrade to the Review system which runs on IE8 before they can authorize the roll out of all computers to IE11 which supports Allocate. The Medical Director has been advised of this. The Guardian hopes this situation will be resolved prior to August 2017. The reporting system does not automatically identify potential safety breaches or collate data required to the satisfaction of the Guardian. Comments from Supervisors advise that it is not user-friendly. In all Exception Reports to date the Guardian or the

Medical Staffing department has had to intervene to assist the Supervisor in accessing the system and in reminding them of the process.

Future considerations

By August 2017 the majority of Trainees Doctors will move to the new Contract. The Guardian hopes that Trust doctors may also be given access to the Exception reporting process and the Guardian in the future.

The Junior Doctor Contract remains on the Risk Register.

Risks to Care Groups have been identified as:

- Requests to additional pay by Trainees working in excess of their rostered hours.
- Requests for job plan review by Clinical Supervisors following an increase in their workload.
- Requests for financial reimbursement by the Guardian on account of fines levied in accordance with breaches incurred as per TCS.

The risk remains low at the time of writing whilst only the FY1s are on the Contract. The Guardian would expect this to change in August 2017 as a further 190 trainees transition to the new Contract.

The reporting system will require upgrading by the software company following expressions of discontent from many Guardians.

The Guardian requires Medical Staffing to invest in software that allows data collection of unfilled rota gaps on a daily basis and requests that departments collect data on how they manage these gaps.

It is unclear how the vacancies across the entire workforce impact on individual Trainees and other junior doctors.

Information regarding locum agency spend does not provide the Guardian with information regarding safe working and is not included in this report.

As of August Trainees will no longer be able to provide internal locum cover if this causes a breach of safe hours. This will put a further strain on the workforce as medical staffing struggle to fill gaps at short notice.

Conclusion

The new Contract provides the an opportunity for change for Trainees because, for the first time work schedules set out express contractual commitments for training, as well as service commitments.

The Exception Reporting process allows Trainees to give the Guardian notice of working unsafe hours. However, it remains a concern that despite known understaffing in the Trust and comments regarding Trainees working beyond their scheduled hours, from various informal discussions and forums, that Exception Reporting remains low in this Trust.

To date, the most useful information to the Guardian regarding safe working has been acquired through the Junior Doctor forums held throughout the Trust, her regular meetings with Medical Staffing and by attending the Educational Leads meetings organised by the Director of Medical Education. Medical Staffing have raised concerns regarding unsafe staffing levels. Of the reports provided to the Guardian through Exception Reporting there is no evidence that the current Foundation Year One trainees on the Contract have consistently felt unsafe or unsupported. The Guardian predicts increased reporting throughout the Trust as all Trainees move to the new Contract in August 2017.

Recommendation

The Board is asked to **read** and **note** this report from the Guardian of Safe Working.