Cover page				
Meeting	Trust Board Meeting			
Paper Title	Guardian of Safe Working Annual Report 1 August 2018 – 31 July 2019			
Date of meeting	28 November 2019			
Date paper was written	18 November 2019			
Responsible Director	Dr Arne Rose Medical Director			
Author	Dr Bridget Barrowclough – Guardian of Safe Working Hours (GoSW)			

Executive Summary

All doctors in training at The Shrewsbury and Telford NHS Trust (SaTH) are employed under the Terms and Conditions of Service (TCS) of the 2016 Junior Doctor Contract. In June 2019 a BMA referendum voted in favour of an amended contract - the Refresh Contract 2018 - with an agreed staggered implementation of the changes beginning in August 2019. New safe limits on hours and rest were recognised.

The GoSW continues to champion safe working hours in the Trust to ensure the new safe working limits are introduced.

The Exception reporting process remains in place. This has been embedded in the Trust since August 2016. This was introduced as a means for Junior Doctors to report exceptions to their safe working hours, missed rest and educational opportunities and variations in service commitments.

Compliance with the Exception reporting process timelines continues to improve.

- 130 ERs received since the implementation of the JDC in 2016.
- 91 ERs received in this reporting period an increase of 27% on the previous year.
- 6 Immediate Safety Concerns (ISC) were reported during this period.
- No breach fines were imposed.
- 37.5 hours were compensated by time off in lieu and 27.5 hours in payment in this period.

Many reports relate to work intensity and staffing levels especially at weekends and after hours aggravated by winter pressures and rota gaps.

All reports are relayed to the Medical Director and more recently the Senior Medical Leadership Team.

The Trust has signed up to the Fatigue and Facilities Charter. Rest conditions continue to improve.

The Trust have purchased the Allocate software which will provide organic tracking of all doctors once the system is implemented. This will identify unfilled shifts and ensure safe working patterns.

Recommendations to the Board

• To implement the purchased rostering software as soon as possible to enable organic tracking

of Junior Do	octors staffing levels.				
 To support the timely implementation of the 2018 "Refresh" Contract and with particular reference to support the recruitment of additional doctors and/or healthcare professionals to those areas where rotas remain non-compliant. 					
Previously considered by	N/A				

The Board is asked to:							
Approve	☐ Receive	□ Note	✓ Take Assurance				
To formally receive and discuss a report and approve its recommendations or a particular course of action	To discuss, in depth, noting the implications for the Board or Trust without formally approving it	For the intelligence of the Board without in-depth discussion required	To assure the Board that effective systems of control are in place				

Link to CQC domain:							
▼ Safe	▼ Effective	Caring	▼ Responsive	✓ Well-led			
				•			
Link to strategic objective(s)	Select the strategic objective which this paper supports						
	$\hfill \square$ PATIENT AND FAMILY Listening to and working with our patients and families to improve healthcare						
	SAFEST AND KINDEST Our patients and staff will tell us they feel safe and received kind care						
	$\hfill\Box$ HEALTHIEST HALF MILLION Working with our partners to promote 'Healthy Choices' for all our communities						
	\square LEADERSHIP Innovative and Inspiration Leadership to deliver our ambitions						
	✓ OUR PEOPLE Creating a great place to work						
Link to Board							
Assurance Framework risk(s)							
Tranic Work Hak(3)							
Equality Impact Assessment	• Stage 1 only (no n	egative impact identif	fied)				
	Stage 2 recommended (negative impact identified and equality impact assessment attached for Board approval)						
Freedom of Information Act	C This document is for full publication						
(2000) status	• This document includes FOIA exempt information						
	This whole document is exempt under the FOIA						
Financial							

assessment

Guardian of Safe Working Hours The Shrewsbury and Telford Hospital NHS Trust Annual Report 1 August 2018 – 31 July 2019

Author: Dr Bridget Barrowclough Guardian of Safe Working (GoSW)

The 2016 Junior Doctor Contract (JDC) for Doctors and Dentists in training was implemented by the Shrewsbury and Telford Hospital NHS Trust (SaTH) in August 2019. Currently there are 247 Doctors employed under these conditions of service.

In June 2019 a BMA Referendum voted in favour of an amended contract – the Refresh Contract 2018 – with an agreed, staggered implementation beginning in August 2019 of the changes, including new safe limits on working hours and rest.

This report summaries activities in SaTH towards each of the key requirements of the JDC and gives an overview of the GoSW activity.

Key features of the JDC required SaTH to:

- Appoint a Guardian of Safe Working Hours (GoSW) to champion safe working hours.
- Provide each Trainee with a work schedule setting out rotas which must comply with safe limits mandated in Terms of Conditions of Service (TCS), the service requirements expected and training opportunities during the rotation.
- Provide a robust electronic system to enable Trainees to report variances in their given schedule the Exception Reporting (ER) process.
- Respond to reports in a timely manner as prescribed.
- Provide information regarding rota gaps on all unfilled shifts to the Board in order that, together with information gained from the Exception Reports (ER), the GoSW might reassure the Board that Trainees in the Trust are working to safe limits recommended.
- Hold regular Junior Doctor Forums

Performance to date

The GoSW was appointed in June 2016 and remains in post. Since taking up the role the GoSW has worked closely with Medical Staffing and the Education Team to ensure the requirements of TCS has been applied by the Trust.

All Trainees receive their work schedules according to the TCS in advance of taking up their positions with the Trusts. All rotas are checked for compliance with respect to the safe hours limits using e-rota provided by the Allocate system.

At the time of writing, the new safe limits are being applied to rotas. Currently 82% of Trainee rotas are aligned to the "Refresh Contract". The remaining rotas are on the track to have necessary changes made and introduced by February 2020.

The electronic ER process is embedded in the Trust and has been live since the introduction of the JDC.

In the past year Supervisor engagement has been variable resulting in the need for the GoSW to chase some Exceptions Reports for completion. Compliance with the ER process timelines continues to improve as a result of a revised process involving the Medical Staffing Team and the GoSW administrator. Recently there is evidence of improved engagement from the Clinical Supervisors. This has resulted in the majority of ERs addressed in the required 7 day window.

Currently vacancy information is provided quarterly to the Workforce Committee by Medical Staffing.

SaTH has recently purchased software that will organically track shifts. This system has been provided by Allocate and it is planned to be launched in spring 2020. It is hoped that this system will provide a good overview of unfilled shifts.

Junior Doctor Forums

The GoSW holds regular Junior Doctor Forums together with those held in all specialities throughout the Trust. In the past year the GoSW has held 8 further drop in sessions for all Doctors where food and refreshments are sponsored by the BMA and have been held on both sites (Shrewsbury and Telford). These informal meetings have raised the profile of the GoSW further and helped highlight the ER process. The meetings have been well attended by in excess of 35 doctors on each occasion and have also been supported by the Freedom-To-Speak-Up Guardians and Medical Staffing.

There is no doubt that this Trust listens to Trainees' concerns. The Junior Doctors have access to a supportive Consultant body (many of whom are Clinical and Educational Supervisors) and has the support of an established Education Department under the direction of the DME with whom the GoSW has a close working relationship.

Exception Reports

Exception Reporting rates remain low at SaTH:

- 130 ERs received since the implementation of the JDC in 2016.
- 91 ERs received in this reporting period (1 August 2018 to 31 July 2019) an increase of 27% on the previous year. This appears comparable to the neighbouring Trusts
- Details and outcomes of the ERs and compliance with the process of reporting ERs (Appendix 1).
- Temporal distribution of reports (Diagram 1) –there was increased reporting in Quarter 2, and very few ERs raised in Q4
- Medicine and Surgery continue to receive the majority of ERs (Diagram 2).
- Foundation Year 1 Doctors continue to submit ERs more frequently than other grades (Diagram 3).
- The majority of ERs are received by the GoSW in preference to the Director of Medical Education and therefore relate to hours and service deficiencies rather than issues relating to missed training opportunities (Diagram 4).
- The number of immediate safety concerns remain low (Diagram 5).
- 37.5 hours compensated by time off in lieu and 27.5 hours in payment in the time period monitored

The GoSW feels we do not we have a true picture of the hours our Junior Doctors are working. Whilst few doctors report exceptions via the ER process the information gained from these reports regarding their working lives is valuable and feedback to the Care Groups supports improvement and change in the workforce.

Doctors appear to remain reluctant to report despite encouragement from the GoSW, DME Foundation Programme Directors and Medical staffing in all forums. However we need to continue to encourage our Consultant body to support Exception reporting.

There appears to be no correlation between known vacancies and those departments receiving ERs on account of rota gaps. The majority of ERs relate to work load intensity and gaps formed by short term sickness with the reporting rate increasing during the winter months. The most common theme was for late finishes. Inefficient handovers have been reported and have a significant impact on the junior doctor ability to leave work on time. Throughout the year attempts have been made to rectify this by the Care Groups. Significant efforts have been made to improve recruitment amongst the junior doctor workforce in SaTH in the past year.

Immediate Safety Concerns

Six Immediate Safety Concerns (ISC) were submitted during this period.

In surgery two reports cited the failure of a locum to attend – this was deemed unavoidable – the matter was referred to the locum agency .The doctor affected was supported by other members of the team and the Supervising Consultant. It was noted that the surgical teams were short of middle grade registrars at the time. This was corrected in October 2019 when the Trust gained a full complement of these doctors.

A further report was submitted over the Christmas period when it was noted that there was a period of staff shortages combined with winter pressures .One ISC in surgery was raised on account of work intensity due to unfilled gaps due to sickness.

In medicine a report was raised as an ISC due to a difference in support due to an unfilled shift.

Two further episodes reported the movement of a doctor at night from one site to another to support staff in medicine. The other incident was reported by an FY1 who had been asked to cover both surgery and medicine at night without reference to the Supervising Consultant. Both episodes were discussed within the Care Group.

Work schedule Review

One work schedule review was performed in ENT following an Exception Report with rescheduling of handover.

Reporting Cycle

The GoSW continues to report to the Workforce Committee, the Board and Shropshire Community Health Board on a quarterly basis, and the Local Negotiating Committee at regular intervals as contractually mandated. Recently monthly reports are directed to the Unscheduled Care Group Board meeting also.

The GoSW joined the Senior Medical Leadership Team (SMLT) in September 2019 and provides weekly updates to the Medical Director and Care Group Medical Directors involvement in this team has reassured the GoSW that the Junior Doctors concerns are being heard by the medical leadership teams in the Trust at the earliest opportunity. The GoSW will continue to champion the improvement in communication between the Trust and juniors.

Summary

Concerns regarding patient and doctor safety have been raised this year by the Exception reporting process and in the main echoed those concerns raised informally and in Junior Doctor Forums regarding the workload intensity , especially with reference to the staffing levels amongst the junior doctor workforce at weekends and on call/cover shifts after hours. At times these issues have been exacerbated by short term sickness and known vacancies. Junior doctors continue to report difficulties in accessing information regarding the availability of locum shifts. The medical staffing team have invested in a Locum app to be launched in November. The Trust have also purchased a live rostering software system which will be implemented in the future.

Assurances have been given by the Care Groups that the doctors remain supported at all times. It is the GoSW's hope that the staffing levels at the weekends and after hours will be reviewed and adjusted in the future.

In the coming months the Refresh Contract will be implemented in the Trust. The Guardian will continue to champion safe working hours and raise junior doctor concerns to the attention of the medical leadership teams and the Board.