

Board of Directors' Meeting 8 December 2020

Agenda item	xxx/20							
Report	Guardian of Safe Working Quarterly Report August-October 2020							
Executive Lead	Medical Director							
	Link to strategic pillar:	Link to CQC doma	ain:					
	Our patients and community	X	Safe	X				
	Our people	X	Effective	X				
	Our service delivery	X	Caring	X				
	Our partners	X	Responsive	X				
	Our governance	X	Well Led	X				
	Report recommendations:		Link to BAF / risk	:				
	For assurance							
	For decision / approval	X	Link to risk regist	er:				
	For review / discussion							
	For noting	For noting						
	For information							
	For consent							
Presented to:	Guardian of Safe Working / Medi	cal D	irector					
Dependent upon (if applicable):								
Executive summary:	This report is presented with the aim of providing the context and assurance of safe working hours and rest for Junior doctors and dentist in training in the Trust It highlights concerns to the Board regarding safe working hours, missed rest breaks and where issues have been raised using the Exception reporting process regarding service commitments that have implications for the safety of our patients and JDs. In this period JDs returned to more recognisable working patterns following the first Covid-19 wave with in excess of 140 new doctors commencing rotations in August. 39 Exception reports were received in this period including 3 Immediate Safety Concerns. Compliance with the process remains variable .However the GoSW exercises her remit to agree to compensation within 7 days if not							
Appendices	addressed by the Supervisor. Appendix 1:Exception reports Appendix 2:Vacancies Appendix 3:Locum bookings by trainee							

1.0 Introduction

This report is presented to the Trust Board with the aim of providing the context and assurance around safe working hours for Doctors and Dentists in training (Junior Doctors) in the Trust.

It highlights concerns to the Trust Board regarding safe working hours, missed rest periods and where issues have been raised regarding service commitments through that impact our Junior doctors in training using an Exception reporting process.

In this period doctors returned to more recognisable working patterns following the first COVID-19 wave with many Junior Doctors commencing new rotations within the Trust in August.

2.0 Second item to highlight

- 2.1 Thirty-nine reports were received in this period including three immediate safety concerns.
- 2.2 Consistent with the trend seen in previous years, increased reporting is noted in the first two months of the August rotation coinciding with the introduction of new trainees to the Trust.
- 2.3 There are reports from a variety of grades compared to previous years, possibly as the Exception Reporting process becomes embedded in this and other Trusts as a means of raising concerns.
- 2.4 The majority of reports related to hours worked over in unscheduled care.
- 2.5 All reports have been addressed.
- 2.6 Breach fines applied

3.0 Risks

Patient and Doctor safety may be compromised if the Trust does not comply with the safe limits as defined in the Terms and Conditions of the Junior Doctor Contract 2016.

4.0 Conclusion

The Board is asked to note this report.

Guardian of Safe Working November 2020

Guardian of Safe Working (GoSW) Quarterly Report

1 August - 31 October 2020

The Shrewsbury and Telford NHS Trust

Situation

This report is presented to the Trust Board with the aim of providing the context and assurance around safe working hours for Doctors and Dentists in training (Junior Doctors) in the Trust

It highlights concerns to the Trust Board regarding safe working hours, missed rest periods and where issues have been raised regarding service commitments through that impact our Junior doctors in training using an Exception reporting process.

In this period doctors returned to more recognisable working patterns following the first COVID-19 wave with many Junior Doctors commencing new rotations within the Trust in August.

Background

All trainee doctors at the Trust are employed under the Terms and Conditions of Service (TCS) of the 2016 Junior Doctor Contract.

Junior Doctors receive work schedules that adhere to the safe working limits for hours and rest. Any concerns regarding variations or breaches in the work schedule with respect to working hours, rest breaks and service commitments can be reported to the GoSW via the Exception Reporting process.

The data gathered can provide useful information regarding the workload on each rota in question and is one method by which Junior Doctors can raise concerns regarding safe working. However in order that this reflects the true picture, all doctors working all rotas would need to report all events and therefore any non-engagement with the process limits interpretation.

The GoSW escalates concerns to the Care Group Medical Directors. Senior Managers receive notification of reports within their department. The GoSW reports to the Unscheduled Care Group at monthly intervals, and to the Local Negotiating Committee at no less than quarterly intervals.

The most serious breaches of safe working limits result in fines for the Care Group in which the breach occurred.

In June 2019 the TCS were revised and agreed nationally. In accordance with the revised 'Refresh Contract 2018'. The Trust commenced an implementation schedule recognising the new safe limits.

In March 2020 significant changes were made to the working practices of Junior Doctors as a consequence of COVID-19.

By August 2020 usual working patterns and rotations had resumed.

Assessment

1.0 High level data

Number of trainees in training = 224.

2.0 Exception Reports received in Q1 – please see appendix 1 for full details

Comments regarding Exception Reports

- 2.1 Thirty-nine reports were received in this period including three immediate safety concerns.
- 2.2 Consistent with the trend seen in previous years, increased reporting is noted in the first two months of the August rotation coinciding with the introduction of new trainees to the Trust.
- 2.3 There are reports from a variety of grades compared to previous years, possibly as the Exception Reporting process becomes embedded in this and other Trusts as a means of raising concerns.
- 2.4 The majority of reports related to hours worked over in unscheduled care.
- 2.5 Three each were related to support during service commitments, missed educational opportunities and patterns of work in unscheduled care.
- 2.6 There were no high level work reviews as a result of disputes between the trainee and Supervisor.
- 2.7 A recurrent theme in reports in Unscheduled Care relate to poor communication within teams especially in instances of staff shortage due to sickness, workload intensity and the redistribution of tasks. This has been discussed by Clinical Supervisors and in forums.
- 2.8 Assurances have been given by the Care Group Director for Unscheduled Care that a robust rota is in place amid the second Covid-19 wave. Additional doctors have been requested to supplement rotas throughout the week. It should be noted that medical staffing advise of a nationwide locum shortage.
- 2.9 The GoSW has communicated concerns regarding the challenges with rostering to the Medical Leadership Team as the second wave threatens to coincide with winter pressures.
- 2.10 The GoSW is advised that the doctors remain well supported by their Consultant.

3.0 Immediate Safety Concerns (ISCs)

- 3.1 Two ISCs received in this period relate to poor communication between the rostering team and medical staff resulting in a failure to redistribute tasks causing one doctor to have a significant increase in workload intensity.
- 3.2 One further incident was filed to raise concerns regarding the failure of equipment. The PSAG system having failed caused significant delays for the management of patients.

4.0 Breach fines

4.1 No breach fines were applied in this time period.

5.0 Engagement

5.1 Junior Doctor Engagement

- 5.11 Junior Doctor Contract Forums and drop-in sessions continue.
- 5.12 Engagement with Juniors is proving difficult as face to face meetings are restricted by social distancing. Virtual Teams meeting function well but attendance remains poor.
- 5.13 The education department have reorganised forums within departments. These are taking place virtually or on site.

5.2 Clinical Supervisor Engagement

5.21 Supervisor response times remain variable. The majority of Exception Reports are addressed within 7 days.

5.22 The GoSW exercises her remit to agree outcomes when unaddressed by the Supervisor at 7 days but continues to pursue such reports until an outcome is reached.

5.3 GoSW engagement

5.31 All new trainees are briefed at induction by the GoSW with respect to the process and importance of the exception reporting process.

5.32 The GoSW

- attends as many forums as clinical commitments will permit
- meets with the Educational Leads and DME at regular intervals and communicates weekly with The DME and Postgraduate Hospital Dean
- remains in weekly contact with the DME, CGMDs and MD.

5.33 The GoSW is currently working with other colleagues in developing a Well-being Programme for Junior Doctors. This will support their holistic well-being and complement the existing Trust wide support programme addressing aspects of the BMA Mental Well-being Charter. Currently trainees receive access to local well-being support via the Education Faculty and Educational Supervisors - with links to the Professional Support and Well-being Unit at HEE. The Trust continues to address rest and catering facilities in line with the BMA Fatigue and Facilities Charter.

6.0 Vacancies and Unfilled Shifts

6.10 The GoSW is asked to provide data on vacancies and unfilled shifts – please see Appendix 2.

6.20 These vacancies arise as a consequence of a significant recruitment drive in the Trust and the introduction of the Clinical fellowship programme. Currently the Trust does not have a system for collecting raw data on unfilled shifts and how these are managed on a daily basis. A live rostering system may help address this in the future and give the Board additional reassurance that doctors are rostered safely.

7.0 Locum Shifts by Trainees

This data is included to highlight instances of trainees breaching their safe hours. In the majority of cases this could be rectified by the doctors opting out of the 48 hours ruling. Medical staffing are encouraged to ensure this is the case.

Recommendations

The Board is asked to read and approve this report.

APPENDICES

Appendix 1

Exception Reports 1 August - 31 October 2020

Submitted	Grade	Speciality	No. of exceptions	Туре	Breach type	Status	Outcome (TOIL /pay hours)
7/8	CT2	Medicine (Gastroenterology)	1	Hours	Overtime	Completed	3 hoursTOIL
12/8	FY2	Medicine (Cardiology)	1	Hours	Overtime	Completed	0.25 hoursTOIL
13/8	FY2	Medicine (Cardiology)	1	Hours	Overtime	Completed	0.25 hours TOIL
14/8	FY2	Medicine (Cardiology-PRH)	1	Hours	Overtime	Completed	0.75TOILdiscussion CD re timings Board rounds
15/8	CT2	Medicine -on cover	1	Rest	Natural breaks	Completed	IT equipment/PSAG failure-escalated
19/8	CT2	Medicine	1	Hour and ISC	ISC	Completed	Highlighted 1 hour gap between 2000 and 2100 when Fy1 cover slot is populated by Critical care (doctor leaves at 2000 due to 0800 start following day.Discussion to alter start CC doctor 0.75 TOIL
11/9	FY1	Medicine(cardiology PRH)	1(refers to pattern)	Hours	Overtime	Awaiting filing by CS	Several reminders to CS to file report Issues addressed in previous concern raised in Cardiology
17/8,18/8, 19/8	CT1	Medicine	3	Hours	Overtime	Completed	3.5 TOIL Busy shifts with limited junior doctor availability. Juniors supported by middle grades tasked to map out availability and distribute between areas in future. Assurance that Registrar allocated in support of juniors
20/8	CT1	Medicine (AMU)		Hours	Overtime	Completed	1.50 Payment workload in excess of time to complete
01/09	FY1	Medicine (Cardiology)	1	Hours	Overtime	Completed	1 hour TOIL
01/09	CT1	Medicine	1	Hours	Overtime	Completed	TOIL
01/09	CT2	Medicine	1	Hours	Overtime	Completed	2 hours TOIL
21/08	CT1	Medicine	1	Hours	Overtime	Completed	1.15 hours TOIL
22/08	CT1	Medicine	1	Hours	Overtime	Completed	1 hour TOIL
01/09	FY1	General Medicine	1	Hours	Overtime	Completed	1 hour TOIL
03/09	FY1	General Medicine	1	Hours	Overtime	Completed	1.5 hours TOIL
27/08	FY1	Medicine (Cardiology)	1	Hours	Overtime	Completed	1 hour TOIL
28/08	FY1	Medicine (Cardiology)	1	Hours	Overtime	Completed	1 hour TOIL
17/09	FY1	General Medicine	1	ISC	Safety	Completed	Doctor advised to escalate to seniors in future. Poor communication within team – left Junior Doctor feeling isolated.
15/09	FY1	General Medicine	1	ISC	Safety	Completed	Doctor advised to escalate to seniors in future. Poor communication within team – left Junior Doctor feeling isolated.
07/09	FY2	Medicine (Cardiology)	1	Hours	Natural break	Completed	NFA

09/09	FY2	Medicine (Cardiology)	1	Hours	Overtime	Completed	0.5 hours TOIL
10/09	FY2	Medicine (Cardiology)	1	Hours	Overtime	Completed	0.75 hours TOIL
14/09	FY2	Medicine (Cardiology)	1	Hours	Overtime	Completed	0.5 hours TOIL
15/09	FY2	Medicine (Cardiology)	1	Hours	Overtime	Completed	0.25 hours TOIL
11/09	FY1	Medicine (Cardiology)	1	Hours	Overtime	Completed	1.5 hours TOIL
09/09	FY1	Medicine	1	Difference in support	On Call	Completed	In event of middle grade sickness – doctor advised to escalate to senior colleagues in future
27/10	FY1	Medicine	1	Hours	Overtime	Incomplete	1 hour – GOSW to authorise payment
29/10	CT1	Medicine	1	Hours	Overtime	Incomplete	2.5 hours - GOSW to authorise payment
26/10	FY1	Medicine	1	Hours	Overtime	Incomplete	0.75 hour – GOSW to authorise payment
12/08	FY1	Surgery	1	Hours	Overtime	Completed	1 hour TOIL
13/08	FY1	Surgery	1	Hours	Overtime	Completed	1.5 hours TOIL
14/08	FY1	Surgery	1	Hours	Overtime	Completed	2.5 hours TOIL
24/08	FY1	General Surgery	1	Hours	Overtime	Completed	1.25 hours TOIL
21/10	FY1	General Surgery	1	Hours	Overtime	Completed	1 hour payment
15/09	FY1	T&O	1	Hours	Overtime pattern	Completed	9 hours TOIL – discussions regarding ortho- geriatric ward round
15/10	FY1	O&G	1	Hours	Overtime	Completed	1.5 hours payment and review of support on Fridays (temporary SHO shortage)

^{*}ISC-Immediate Safety Concern-addressed within 24 hrs as per TCS

Appendix 2

Vacancies from August 2020

Grade	Department	Site	Qty	Comments
ST3	Colorectal Surgery	RSH	1	
Trust ST1	Upper GI	RSH	1	
CT2	Vascular Surgery	RSH	1	
Trust ST3	Anaesthetics	PRH	1	
Teaching Fellow	Anaesthetics	RSH	3	
ST3	Anaesthetics	RSH	1	
CT1	Anaesthetics	RSH	2	
Senior Clinical Fellow	T&O	PRH	2	
FY2	T&O	PRH	1	
ST3	T&O	RSH	1	
Trust ST1	T&O	RSH	1	
Clinical Fellow Oculoplastics	Ophthalmology	RSH	1	
Trust ST3	Oncology	RSH	3	
Trust ST1	Oncology	RSH	2	
FY2	GP	Alveley	1	
Senior Clinical Fellow	A&E	RSH	1	
ST3	A&E	RSH	1	
Simulation Fellow	A&E	RSH/PRH	1	
Junior Clinical Fellow	A&E	RSH	1	
ACCS	A&E	RSH	2	
ST3	Care of the Elderly	PRH	2	
Trust ST1	Ward 11	PRH	1	
Junior Clinical Fellow	Cardiology	PRH	1	
Junior Clinical Fellow	Care of the Elderly	PRH	2	
Senior Clinical Fellow	AMU	RSH	1	
Senior Clinical Fellow	Respiratory	RSH	1	
ACCS	AMU	RSH	1	
GPVTS	Renal	RSH	1	
Junior Clinical Fellow	Renal	RSH	1	
Junior Clinical Fellow	Respiratory	RSH	1	
Junior Clinical Fellow	Cardiology	RSH	1	
Junior Clinical Fellow	Endo	RSH	1	
FY2	Onc/Haem	RSH	1	
GPVTS	Paediatrics	PRH	2	

Vacancies from September 2020

Grade	Department	Site	Qty	Comments
ST3	Colorectal Surgery	RSH	1	
Trust ST1	Upper GI	RSH	1	
CT2	Vascular Surgery	RSH	1	
Trust ST3	Anaesthetics	PRH	1	
Teaching Fellow	Anaesthetics	RSH	3	
ST3	Anaesthetics	RSH	1	
CT1	Anaesthetics	RSH	2	
Senior Clinical Fellow	T&O	PRH	2	
FY2	T&O	PRH	1	
ST3	T&O	RSH	1	
Trust ST1	T&O	RSH	1	
Clinical Fellow Oculoplastics	Ophthalmology	RSH	1	
Trust ST3	Oncology	RSH	3	
Trust ST1	Oncology	RSH	2	
FY2	GP	Alveley	1	
Senior Clinical Fellow	A&E	RSH	1	
ST3	A&E	RSH	2	
Simulation Fellow	A&E	RSH/PRH	1	
Junior Clinical Fellow	A&E	RSH	1	
ACCS	A&E	RSH	2	
ST3	Care of the Elderly	PRH	1	
Trust ST1	Ward 11	PRH	1	
Junior Clinical Fellow	Cardiology	PRH	1	
Junior Clinical Fellow	Care of the Elderly	PRH	2	
Senior Clinical Fellow	AMU	RSH	1	
Senior Clinical Fellow	Respiratory	RSH	1	
ACCS	AMU	RSH	1	
GPVTS	Renal	RSH	1	
Junior Clinical Fellow	Renal	RSH	1	
Junior Clinical Fellow	Respiratory	RSH	1	
Junior Clinical Fellow	Endo	RSH	1	
FY2	Onc/Haem	RSH	1	
GPVTS	Paediatrics	PRH	2	
Neonates	Neonates	PRH	1	

Vacancies from October 2020

Grade	Department	Site	Qty	Comments
Trust ST1	Upper GI	RSH	1	
CT2	Vascular Surgery	RSH	1	
Trust ST3	Anaesthetics	PRH	1	
Teaching Fellow	Anaesthetics	RSH	3	
CT1	Anaesthetics	RSH	2	
Senior Clinical Fellow	T&O	PRH	1	
FY2	T&O	PRH	2	
ST3	T&O	RSH	1	
Trust ST1	T&O	RSH	1	
Clinical Fellow Oculoplastics	Ophthalmology	RSH	1	
Trust ST3	Oncology	RSH	3	
Trust ST1	Oncology	RSH	2	
FY2	GP	Alveley	1	
Senior Clinical Fellow	A&E	RSH	1	
ST3	A&E	RSH	2	
Simulation Fellow	A&E	RSH/PRH	1	
Junior Clinical Fellow	A&E	RSH	1	
ACCS	A&E	RSH	2	
ST3	Care of the Elderly	PRH	1	
Trust ST1	Ward 11	PRH	1	
Junior Clinical Fellow	Care of the Elderly	PRH	2	
Trust ST1	Ward 11	PRH	1	
Senior Clinical Fellow	AMU	RSH	1	
ACCS	AMU	RSH	1	
GPVTS	Renal	RSH	1	
Junior Clinical Fellow	Renal	RSH	1	
Junior Clinical Fellow	Endo	RSH	1	
FY2	Onc/Haem	RSH	1	
GPVTS	Paediatrics	PRH	2	
ST1	Neonates	PRH	1	

Appendix 3

Locum Bookings by trainees

Specialty	Grade	Number of Shifts Worked	Number of hours worked	Number of hours rostered per week	Actual hours worked per week	Opted out of WTR?	Comments
Oral & MaxFac Surgery	DCT1-2	1	12.5	47.5	48.5	Y	
Oral & MaxFac Surgery	DCT1-2	2	25	47.5	49.5	Y	
Paediatrics	ST3-8	1	4.5	47.5	48	N	
General Surgery	ST3-8	3	39	47.5	50.5	N	
General Medicine	ST3-8	1	12.5	46.25	47.25	N	
ENT	ST3-8	4	69	47.25	52.75	N	
Urology	ST3-8	7	150	45.75	57.5	N	
T & O Surgery	ST3-8	2	50	47	51	N	
General Surgery	ST3-8	1	12.5	47.5	48.5	N	
General Medicine	ST1-2	9	76.5	46.25	52.25	N	
Paediatrics	ST3-8	3	31.5	47.5	50	N	
Obs & Gynae	ST3-8	10	79	47.75	54	N	
General Surgery	ST3-8	3	49	47.5	51.5	N	
Anaesthetics	ST3-8	4	40	42	45.25	N	
General Surgery	ST3-8	6	103	47.5	55.5	N	
Neonates	ST3-8	2	26	48	50	N	
ENT	ST3-8	3	54	47.25	51.5	N	
Oral & MaxFac Surgery	ST3-8	7	159	47.5	59.75	N	
General Medicine	ST3-8	1	12.5	46.25	47.25	N	
Anaesthetics	ST3-8	4	50	42	46	N	
Anaesthetics	ST1-2	2	14.5	46.5	47.75	N	
T & O Surgery	ST3-8	11	169.5	47	60.25	N	
GP	FY2	13	152	40	51.75	N	
Anaesthetics	ST3-8	3	28.5	47	49.25	N	
Obs & Gynae	ST1-2	1	12.5	47	48	N	
General Medicine	ST1-2	10	89.5	46.5	53.5	N	
Obs & Gynae	ST1-2	6	32.5	47	49.5	N	
T & O Surgery	ST1-2	2	18	47.25	48.75	N	
Paediatrics	ST1-2	1	10.25	44	45	N	
Paediatrics	ST1-2	4	41.25	44	47.25	N	
Paediatrics	ST1-2	4	35.75	44	46.75	N	
General Medicine	ST1-2	17	145.75	46.5	57.75	N	
Neonates	ST1-2	1	4.75	47	47.5	N	
General Medicine	ST1-2	3	37.5	46.5	49.5	Υ	
General Medicine	ST3-8	5	62	46.25	51.25	Y	
T & O Surgery	ST1-2	1	13	46.5	47.5	Y	
General Medicine	ST1-2	3	13.5	46.5	47.75	Y	
T & O Surgery	ST1-2	2	25	46.5	48.5	Y	
General Surgery	ST1-2	3	34	47	49.75	Y	
Neonates	FY2	4	42	45	48.25	Y	
T & O Surgery	FY2	3	26	47.25	49.25	Y	
General Surgery	FY2	1	3.5	47	47.5	Y	
General Medicine	ST1-2	9	74.25	46.5	52.25	Y	
Ophthalmology	FY2	1	4.75	40	40.5	Y	
Emergency Department	ST1-2	11	136	41	51.5	Y	

Total		293	3129.5				
Obs & Gynae	FY1	1	1.25	40	40.25	N	
T & O Surgery	FY2	1	12.5	46.5	47.5	Y	
ENT	ST1-2	2	16	46.75	48	Y	
General Medicine	ST1-2	1	12.5	46.5	47.5	Y	
Neonates	ST3-8	2	26	48	50	N	
General Medicine	ST3-8	1	12.5	46.25	47.25	N	
Obs & Gynae	ST1-2	3	36.75	47	50	N	
General Medicine	ST1-2	5	34	46.25	49	N	
Urology	ST1-2	1	15	45.75	47	N	
Anaesthetics	ST3-8	1	3.5	47	47.5	N	
Anaesthetics	ST1-2	1	8	47	47.75	N	
General Medicine	ST3-8	1	1	46.25	46.5	N	
General Medicine	ST1-2	2	16	46.25	47.5	N	
Emergency Department	FY2	2	13.5	41	42.25	N	
Obs & Gynae	ST1-2	3	30	47	49.5	N	
General Medicine	ST3-8	1	12.5	46.25	47.25	N	
General Medicine	ST3-8	1	12.5	46.25	47.25	N	
Anaesthetics	FY1	1	4.5	40	40.5	N	
General Medicine	FY1	1	4.5	46.5	47	N	
Anaesthetics	FY1	5	58	40	44.5	N	
General Surgery	FY1	1	12.5	46.5	47.5	N	
General Medicine	FY1	1	5	46.5	47	Y	
General Surgery	FY1	3	37.5	46.5	49.5	Y	
Paediatrics	FY1	2	9	41	41.75	Y	
General Medicine	FY1	9	40.5	46.5	49.75	Y	
T & O Surgery	FY1	3	22	40	41.75	Υ	
T & O Surgery	FY2	4	51	47.25	51.25	Y	
T & O Surgery	FY2	8	101.5	47.25	55.25	Y	
General Surgery	FY2	1	3	47	47.25	Y	
GP	FY2	20	141	40	51	Y	
T & O Surgery	FY2	2	26.5	46.5	48.75	Υ	
Psychiatry	FY2	1	8	46	46.75	Υ	
General Medicine	FY2	2	20.5	46.25	48	Υ	
General Medicine	ST1-2	1	12.5	46.25	47.25	Υ	
Emergency Department	ST1-2	4	26.75	41	43.25	Y	