

Board of Directors Meeting 11 March 2021

Agenda item	059/21			
Report	Guardian of Safe Working Hours - Dr Bridget Barrowclough			
Executive Lead	Medical Director - Dr Arne Rose			
	Link to strategic pillar:		Link to CQC domain:	
	Our patients and community	X	Safe	X
	Our people	X	Effective	X
	Our service delivery	X	Caring	X
	Our partners		Responsive	X
	Our governance		Well Led	X
	Report recommendations:		Link to BAF / risk:	
	For assurance			
	For decision / approval		Link to risk register:	
	For review / discussion			
	For noting	X		
	For information			
	For consent			
Presented to:	N/A			
Dependent upon	N/A			
Executive summary:	<p>It remains the requirement of the Junior Doctor (JD) Contract 2016 for the Trust Guardian of Safe Working Hours (GoSW) to hold responsibility for ensuring that issues of compliance with safe working hours are addressed in accordance with its Terms and Conditions (TCS). This includes overseeing the Exception Reporting (ER) process. The Covid-19 pandemic entered a second wave during this reporting cycle which resulted in some doctors being redeployed to priority care.</p> <p>This report provides quantitative data around safe working hours reported by Junior Doctors in Training for Q2 2020/2021.</p> <p>As highlighted in previous reports the collection and interpretation of data relating to the Junior Doctor workforce – i.e. the rota gaps, vacancies and relevance of locum usage - continues to challenge Trusts both locally and nationally.</p> <p>It is important to note that we can only provide data of the 26 ERs submitted during this reporting period to reflect the situation. There is a requirement for further development for reporting of information which to some end could be addressed with the implementation of MedicOnDuty where the gaps will be clearly identified.</p>			
Appendices	Appendix 1: Vacancies			

1.0 INTRODUCTION

1.1 Background

The Terms and Conditions of Service for NHS Doctors and Dentists in Training (England) 2016 state:

- The Guardian reports to the Board of the employer (and host organisation, if appropriate), directly or through a committee of the Board, as below.
- The Board must receive a Guardian of Safe Working Report no less than once per quarter. This report shall also be provided to the JLNC, or equivalent. It will include data on all rota gaps on all shifts.
- The Board is responsible for providing annual reports to external bodies as defined in these terms and conditions, including Health Education England (Local office), Care Quality Commission, General Medical Council and General Dental Council. There may be circumstances where the Guardian identifies that certain posts have issues that cannot be remedied locally, and require a system-wide solution. Where such issues are identified, the Guardian shall inform the Board. The Board will raise the system-wide issue with partner organisations (e.g. Health Education England, NHS England, NHS Improvement) to find a solution.

2.0 SUMMARY OF INFORMATION

2.1 High level data

Number of Doctors and Dentists in Training on 2016 TCS	223
Number of GP Trainees hosted by Trust	34
Guardian of Safe Working Hours	2PA/week
Administrative support to GoSW	0.2 WTE
Safe Working Advisor	tbc

2.2 Summary of Exception Reports

Exception Reports	Number	Comments
Hours ERs	16	
Education ERs	2	
Pattern of work ER	0	
Service support ER	4	
Total ERs for the period	22	No ISCs*

- * Immediate Safety Concerns – none identified
- Guardian fines – none identified

Rota I.D	No. of Exceptions	Issues/Concerns	Actions /Resolutions
RKF006 Medicine F1	3	(1) Workover as result of deteriorating patient. (2) Workover due to delays in ability to handover tasks to on cover team who were also busy due to workload-and F1 short. (3) Missed breaks during 12 hour shift due to workload. Hospital at night bleep diverted to F1 as occupied with COVID patients.	Supervisor has agreed to payment for workover and asked whether payment might be agreed for missed rest. Advised of contractual obligations - 25% missed breaks over 4 weeks will result in breach fine. Trainees receive paid rest breaks. GoSW has advised will discuss local agreement for future. Work schedule review pending but not felt

			necessary as rotas to return to normal 3/3/21.
RLZ 014/028 Medicine / CT2	1	(1) Missed breaks – Care of the Elderly usually covers medical outliers on W34. During COVID the respiratory team have taken more beds resulting in outliers on W33. Over this period COVID cohorts on W26U resulting in none on W33/34. As a consequence significant increase in workload for renal team. The teams were supported by a Consultant.	Supervisor advised short term issue amid surge. No further action.
RLZ014/028 CT2/Medicine	1	Vacant slot on rota - 3 shifts.	Supervisor concerns regarding current technology used to contact doctor. The bleep system has been replaced in other Trusts with smart phones enabling doctors to prioritise tasks with each other. Concerns regarding lack of staff to perform venesection or cannulation. GoSW will discuss with MLT.
RKF006 Medicine F1	1	(1) Service commitment – both SHO and F1 granted A/L – published rota inaccurate. (2) As above. (3) As above.	Medical staffing advised – additional staff allocated.
RLZ014/028 Medicine ST1 F2	2	(1) Workover due to equipment failures- computers/printers w22. (2) As above.	Division and Trust aware of issues. Payment for time worked over.
Psychiatry F1	3	Workover due to workload.	Time off in lieu (TOIL) agreed with discussion re time management.

RLZ 007 F1	3	<p>(1) Trainees agreed to arrive early to sort results for registrar ward round. Internal agreement with plan to leave earlier than scheduled. As a consequence of workload trainees working beyond finish time.</p> <p>(2) Inability to take back time from earlier report.</p>	<p>Highlighted to CD - trainee advised to work to schedule in future. Confirmed no requirement to arrive early. Payment received</p> <p>Supervisor unable to find gap on rota to return time owing – payment authorised.</p>
RLZ 006 Surgery CT1	2 1	<p>(1) Colorectal ward cover short – sickness –workover due to work intensity - 3 hrs + 2hrs.</p> <p>(2) Workover due to deteriorating patient - 2 hrs.</p>	TOIL
RLZ 006/Surgery/ Vascular/F2	3	(1) Trainee asked to assist colorectal. No Senior input. Staff shortage due to teaching and sickness.	<p>Three reports regarding the day time work load intensity were raised towards the end of one rotation in November in vascular surgery. It was noted that several members of the vascular team had been rostered to be on call resulting in staffing issues on the ward. The situation was compounded by sickness within the team. The situation has not recurred in this rotation. As such the work schedule review has not been undertaken. The GoSW will continue to monitor.</p> <p>Supervisor agreed to raise at Governance. Medical staffing to highlight teaching on</p>

		(2) Workover due to completing tasks rather than handover-1 hour+1hr 45- comment – pattern however no further reports received	work schedule with provision to cover shift. Supervisor reports rota review required if reports persist.
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2.3 Comments

Despite the process remaining available during Covid-19 the numbers of reports remain low. In the past three months Junior Doctors have once again responded to the calls for assistance in areas under pressure. They have demonstrated flexibility and diligence as many have moved outside of their specialities. Both training and non - training grades were redeployed amid the recent COVID-19 surge. All redeployments were managed in consultation with the Junior Doctors, the Director of Medical Education and the Deanery and by the Divisional Leads and Medical Leadership Team.

In future this report and Appendices will be forwarded to Divisional Directors and Directors of Operations for appropriate dissemination and further action at local level. The GoSW will continue to provide the Medicine and Emergency Care Division as requested with a monthly report detailing Exceptions for their Consultant meeting.

2.31 Surgery Division

The Local Negotiating Representatives have raised concerns regarding staffing levels on the weekend cover shifts. These concerns have been escalated to the Clinical, Divisional and Medical Director. This concern is to be discussed in the forthcoming Surgical Governance meeting. At this stage there are no plans to increase the workforce. Both the Director of Medical Education and the GoSW will follow developments.

3.0 ROTA GAPS AND VACANCIES

Current vacancies are attached in Appendix 1.

Data advising how these gaps are filled on a daily basis is unavailable.

The Trusts recruitment plan identifies the filling of long term gaps by locums. This information can be added in the future if required. Data advising how these gaps are filled on a daily basis is unavailable.

The lack of data in this respect has been communicated to the Board in the past. A live rostering system may capture this but would still require a daily detailed analysis of how gaps on shifts were mitigated. For example - there is often further support available from Senior Doctors.

Significant numbers of doctors were redeployed in this quarter from Surgery including ENT, Trauma and Orthopaedics, Women's and Children's Divisions, and other specialities to support the Medical and Emergency Care Division and Critical Care rotas. These rotas were closely managed by the Deputy Divisional Lead for Medicine and Emergency Care and the Trusts Safe Working Advisor in Medical Staffing. Where resultant staffing shortages exposed rota gaps these were filled wherever possible by Consultant colleagues acting down and with locums in line with the COVID-19 and winter pressure policy.

4.0 LOCUM BOOKINGS

The GoSW usually receives data on locum bookings by grade and speciality via agency and internal bank at weekly intervals. This does not however, provide informative data to the GoSW and this does not align with the exception reporting data. There is a requirement for further development for reporting of this information which to some end could be addressed with the implementation of MedicOnDuty where the gaps will be clearly identified.

5.0 RISKS AND ACTIONS

5.1 Compliance

5.1.1 Rota

Despite the redeployment of trainees across specialities, rotas with the exception of anaesthetics remain 2016 compliant.

The RSH anaesthetic trainees agreed to a 1-in-1.67 weekend rota with pay protection as the total average hours reduced to 36.75 hours per week. These rotas should revert to normal working patterns by 22 March 2021.

All other rotas will return to normal working schedules by 3 March 2021.

5.1.2 Exception Reporting process

Compliance with the timelines mandated for addressing reports is variable, often as a consequence of misaligned shift and leave patterns between the supervisor and trainee. At times the Guardian has had to remind supervisors to engage with the process and has escalated to the Divisional Directors as per protocol. The GoSW monitors all reports and exercises the remit to authorise reimbursement of those reports unaddressed at 7 days or in a timely manner at her discretion.

5.2 Junior Doctor Engagement

A GoSW video presentation will provide trainees with an opportunity to access an induction presentation relating to work scheduling and exception reporting.

A regular newsletter to all Junior Doctors will be provided to compliment the communications from the Chief Executive, Medical and Workforce Directors. A January edition will be followed by a further letter in March 2021 to coincide with World Sleep Day reinforcing (as per Fatigue and Facilities Charter) the importance of rest and well-being.

The GoSW continues to hold weekly virtual meetings during COVID-19 and attends as many speciality Junior Doctors Forums (JDF) as clinical commitments permit. The minutes of all these meetings are distributed to the GoSW and Medical Director.

The GoSW plans to liaise with the Junior LNC representatives and report at 2 monthly intervals to the Local Negotiating Committee.

6.0 RECOMMENDATIONS

The GoSW re-iterates a need to locally define how the Trust might provide the nationally mandated assurance in matters relating to hours for Doctors in Training.

7.0 CONCLUSION

The Board is asked to read and note this report

**Guardian of Safe Working Hours - Dr Bridget Barrowclough
March 2021**

Appendix 1

Guardian of Safe Working (GoSW) Appendices 1 November 2020 – 31 January 2021 The Shrewsbury and Telford Hospital NHS Trust

Vacancies from November 2020

Grade	Dept	Site	Qty	Comments
ST3	Vascular Surgery	RSH	1	
Trust ST1	Upper GI	RSH	1	
GPVTS	Colorectal Surgery	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	3	
FY2	T&O	PRH	2	
Trust ST1	T&O	RSH	1	
CT2	T&O	RSH	1	
Clinical Fellow Oculoplastics	Ophthalmology	RSH	1	
Trust ST3	Oncology	RSH	3	
Trust ST1	Oncology	RSH	2	
FY2	GP	Alveley	1	
ST3	A&E	RSH	2	
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	Endo	RSH	1	
FY2	Onc/Haem	RSH	1	
GPVTS	Paediatrics	PRH	2	
ST1	Neonates	PRH	1	

Vacancies from December 2020

Grade	Dept	Site	Qty	Comments
ST3	Vascular Surgery	RSH	1	
Trust ST1	Upper GI	RSH	1	
GPVTS	Colorectal Surgery	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	
GPVTS	ENT	PRH	1	
FY2	ENT	PRH	1	
Senior Clinical Fellow	T&O	PRH	3	
FY2	T&O	PRH	2	
FY1	T&O	PRH	1	
Trust ST1	T&O	RSH	1	
CT2	T&O	RSH	1	
Clinical Fellow Oculoplastics	Ophthalmology	RSH	1	
FY2	Ophthalmology	RSH	1	
Trust ST3	Oncology	RSH	3	
Trust ST1	Oncology	RSH	2	
FY2	GP	Various	2	
GPVTS	A&E	PRH	1	
ST3	A&E	RSH	2	
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	
GPVTS	Respiratory	PRH	1	
Senior Clinical Fellow	AMU	RSH	1	
ACCS	AMU	RSH	1	
GPVTS	Renal	RSH	1	
Junior Clinical Fellow	AMU	RSH	1	
ST1	Neonates	PRH	1	

Vacancies from January 2021

Grade	Dept	Site	Qty	Comments
ST3	Vascular Surgery	RSH	1	
Trust ST1	Upper GI	RSH	1	
GPVTS	Colorectal Surgery	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	
DCT	Oral Surgery	PRH	1	
GPVTS	ENT	PRH	1	
FY2	ENT	PRH	1	
Senior Clinical Fellow	T&O	PRH	3	
FY2	T&O	PRH	2	
FY1	T&O	PRH	1	
Trust ST1	T&O	RSH	1	
CT2	T&O	RSH	1	
Clinical Fellow Oculoplastics	Ophthalmology	RSH	1	
FY2	Ophthalmology	RSH	1	
Trust ST3	Oncology	RSH	3	
Trust ST1	Oncology	RSH	2	
FY2	GP	Various	2	
GPVTS	A&E	PRH	1	
ST3	A&E	RSH	2	
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	
GPVTS	Respiratory	PRH	1	
Senior Clinical Fellow	AMU	RSH	1	
ACCS	AMU	RSH	1	
GPVTS	Renal	RSH	1	
Junior Clinical Fellow	Cardiology	RSH	1	
Junior Clinical Fellow	AMU	RSH	1	
ST3	Obs & Gynae	PRH	1	
ST1	Neonates	PRH	1	