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| DATE OF MEETING | 27 August 2018 |
| REPORT FOR | Trust Board of Directors – Public |
| REPORT FROM | Bryony Simpson Guardian of Safe Working Hours |
| CONTACT OFFICER | Jane Heaton |
| SUBJECT | Quarterly Report |
| BACKGROUND DOCUMENT (IF ANY) | N/A |
| PURPOSE OF THE REPORT: | For Assurance |
| EXECUTIVE SUMMARY (PLEASE INCLUDE: A SUMMARY OF THE REPORT, KEY POINTS & / OR ANY RISKS WHICH NEED TO BE BROUGHT TO THE ATTENTION OF THE TRUST BOARD AND ANY MITIGATING ACTIONS, WHERE APPROPRIATE) | The quarterly report (May, June, July 2018) details the update on the Guardians work and the progress within NL & GFT regarding the implementation of the 2016 contract including the exception reporting system which is a part of the 2016 contract TCs for Junior doctors. |
| TRUST BOARD ACTION REQUIRED | The Board is asked to note the update regarding the implementation of the 2016 contract |

Board of Directors

Guardian of Safe Working Report

Q4 report 1.5.18 to 31.7.18

1. Introduction and background

This is the quarterly report concerning the progress of the implementation of the 2016 Junior Doctor Contract by the Guardian of safe working hours, including the Exception Reporting system for the quarter May, June, July 2018.

A national review of the 2016 contract by NHS Employers is planned in the autumn of 2018.

Most Junior Doctors of all grades are now on the TCS of the 2016 contract which aims to prevent the working of excessive and potentially unsafe hours.

The Guardian is not part of the management structure and aims to represent and resolve issues related to working hours for the junior doctors. The Guardian is now routinely included in the regular HEE quality visits. These measures should contribute to ensuring the safety of doctors and therefore of patients.

The Board receives a quarterly report from the Guardian, which includes:

- Aggregated data on exception reports, broken down by categories such as specialty, department and grade.
- Details of fines levied against departments with safety issues.
- Data on rota gaps / staff vacancies/locum usage
- Qualitative narrative highlighting areas of good practice and / or persistent concern.

Exception Reporting

Exception Reporting continues to yield useful information about conditions on the frontline for trainees. Combined with the JDF SWH this information has led to improvements in care and behaviours. The Guardian and BMA representatives continue to stress that Exception Reporting is a positive tool highlighting area of concern that can be addressed and improved. We have had no reports this year of any negativity from Consultants or Management regarding Exception Reporting and the system is embedded with the Junior doctor staff.

2. Guardian of Safe Working Report

Implementing the Role

The Guardian continues to be contracted for 1 PA per week (4 hours) and in this time covers NL&GFT and Navigo Mental Health Trust. The Trust is taking a Lead Employer role for GP trainees from 1st August and this will also increase the workload. This time allocation allows for regular review of all ERs logged, responding to overdue ERs and chasing ES for timely responses, arranging and leading regular JDF SWH with reports to Trainees, investigating issues raised by Juniors and/or Supervisors, preparing quarterly reports for the Trust Board, liaising with DME, Medical staffing, BMA, LNC and Trust BMA reps, Attending regional Guardian meetings and sending the relevant information, presenting to new trainees at Induction, attending meetings with HEE and CQC.

Vacancy Rates

Figures for the quarter show vacancy rates of 30% Increased recruiting of Trust grades helps to offset this.

(Appendix 1)

Currently Trust grades are not covered by the 2016 contract although Trusts across England are starting to include them anyway in a spirit of equal opportunities and TCS. This decision has not been made in NL&GFT and so Trust Grade Doctors sit outside of the 2016 Contract and the Exception Reporting system.

The Board will want to decide whether this is to continue or whether they wish to offer the same conditions to Trust Doctors.

Use of Locums

Appendix 2 shows charts of Locum use by month, hours,

Engagement

Engagement with the Educational Supervisors (ES) and other Consultants initially presented a challenge but is steadily improving and following the will of the JDF members that ES are the first port of call for responses to ERs we have persisted in our drive to engage ES, as well as involving Clinical Supervisors where appropriate.

Engagement with the Junior Doctors is regular, usually via phone or e mail and the Guardian has the skilled support of the medical staffing and medical education departments. There are also regular meetings of the Safe Working Hours - Junior Doctors Forum (SWHJDF). Attendance at the Forum has been consistent and representatives from The LNC and DME and MD also attend whenever possible. However, the JDF SWH organised for the last week in July was not attended by any Juniors. Enquiries following the meeting revealed that the timing of the meeting at 5.30 pm the week before rotation was a bad idea as staff were working hard to complete tasks before moving on. The Guardian has been

supported by the BMA, Junior Doctor representatives from DPOW and SGH who liaise with their peers informing and encouraging them. An information and training package has been devised and delivered by the Guardian at Induction sessions and is available electronically. The Junior Doctor representatives regularly liaise with the Guardian regarding any ongoing issues and act as a bridge with the LNC.

The BMA regional representative attends the SWH JDF and is supportive offering advice and liaising with the national BMA. The LNC Chair or deputy has a place at the SWH JDF and receives the minutes of meetings and copies of Board reports.

The Guardian has met with the BMA JD rep at SGH, who is also now a member of the LMC. He is working hard to support and advise trainees.

The Guardian has also met with the Speaking up Guardian to look for any overlaps and will continue to meet with him on a quarterly basis.

The Trust has yet to appoint a Champion for Less Than Full Time Trainees, but the post is now out to advert.

Summary of Exception Reports

Number of ERs in last 3 months from 23.4.18 to 29TH July 2018 = 79 - compared with last quarter which was 89

Hours and Rest = 77

Education = 2

Closed at 19.7.18 = 50

Outstanding at 19.7.18 = 29

Overdue = 13

Following a suggestion from the JDF SWH we are following the example of Leeds Hospitals and authorising any ERs overdue by more than 14 days to ensure TOIL is granted in a timely and meaningful fashion. We will be monitoring ERs and responses to track any persistent, non-responding Educational Supervisors. this system will be kept under review to ensure that it is not resulting in any increase in ES not responding to their trainees ERs.

Themes from Exception Reports

- Lack of staff
- Increased workload
- Emergencies
- Sickness of staff
- Rota gaps/vacancies
- Late ward rounds
- Theatres running late
- BMA duties / LNC attendance
- Needing to meet with families
- Locum Doctors not turning up
- Completing discharge summaries and tasks that cannot be handed over

- Organising investigations urgently
- Audit meeting required attendance of most doctors leaving wards short

Where are Exception Reports coming from?

Top 5 Specialties

| Specialty | |
|----------------------------|----|
| General Surgery | 31 |
| Obstetrics and gynaecology | 8 |
| General Practice | 8 |
| Surgery | 7 |
| General Medicine | 6 |

Which Rotas are reporting? – The top 5

| DRSID | Rota | |
|-------|--|--------|
| 24176 | #3 DPoW , General Surgery & Breast Surgery, F1 | 2 5 |
| 24157 | #31 SGH, Obs & Gynae, F1 | 8 |
| 24155 | #50 GP Grimsby , Central Surgery Barton , F2 | 8 |
| 51505 | Combined F1 Draft 1:7 | 7 |
| 38545 | #7 DPoW , General Surgery , F2 | 6 |

Which Grades are reporting?

| Grade | |
|-------|----|
| F1 | 49 |
| F2 | 16 |
| StR | 1 |

Rota issues

There has been a change in the 72 hours rule so that now it is not to exceed 72 hours in 169 hours rather than 7 days. This means we had one rota that contravened this rule, and this has now been rectified.

Rotas at Navigo and RDaSH have been scrutinised following reports from Juniors and amended to ensure their compliance.

Software System

The Trust uses a nationally procured system for medical staff rotas called the Doctors Rostering System 4 (DRS4), which is the system now used for exception reporting. Each junior doctor on the new contract is given log in details and registered on the system to submit an exception report as necessary. The Educational Supervisors have also been registered and set up on the system. This process must happen with each rotation. The Guardian has sight of all reports and responses.

Exception Reports and Fines.

The whole point of the exception reporting system is to allow employers to address issues and concerns as they arise, in real time, and to keep doctors' working hours, both rostered and actual, within safe working limits. If the system of work scheduling and exception reporting is working correctly then most reports should be responded to with TOIL as the spirit of the agreement is that JDs hours are not excessive during the course of a week and extra payments and fines kept to a minimum.

No fines were imposed during this quarter as there were no breaches of the four conditions specified in the 2016 contract.

Networking

The Guardian attends relevant training and is a member of the quarterly, regional, forum of safe working Guardians as well as having email contact with many other Guardians in the region to share updates etc. The group share data from the Board reports that are in the public domain. This enables some informal benchmarking and collective problem solving.

Next Steps

- Implement the 14 days cut off for ERs ensuring their response with TOIL as the first option.
- Pilot reports to managers and Clinical Leads to arrive at best and most efficient format.
- To ensure all new trainees are given all relevant information at their Induction and have access to support with any queries or obstacles to resolving their issues and ensuring safe working hours. This will help with the reputation of the Trust as an Education provider and encourage the recruitment of Juniors.

3. Conclusion

The total number of ERs has decreased by 10 this quarter. Educational Supervisors are responding to 75% of the ERs and actively working with trainees to resolve ongoing issues. There is evidence of greater engagement in and improved understanding of the Exception Reporting system.

4. Recommendations

1. The Board are asked to read and note the quarterly report from the Guardian of Safe Working Hours.
2. The Board needs to decide whether they wish to offer the same conditions to Trust Doctors as those offered to Junior Doctors by the 2016 contract.
3. The Board are asked to give every support to improve the amount and quality of training offered to Junior Doctors during their time at NLaGFT.

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|---------------|--|
| Author | Bryony Simpson Guardian of Safe Working |
| Owner | Chief Executive |
| Date | August 2018 |

APPENDICES

1.VACANCY RATES

The table below shows the number of trainee posts available and filled by Health Education Yorkshire

and the Humber. Some of the vacancies have been filled by the Trust.

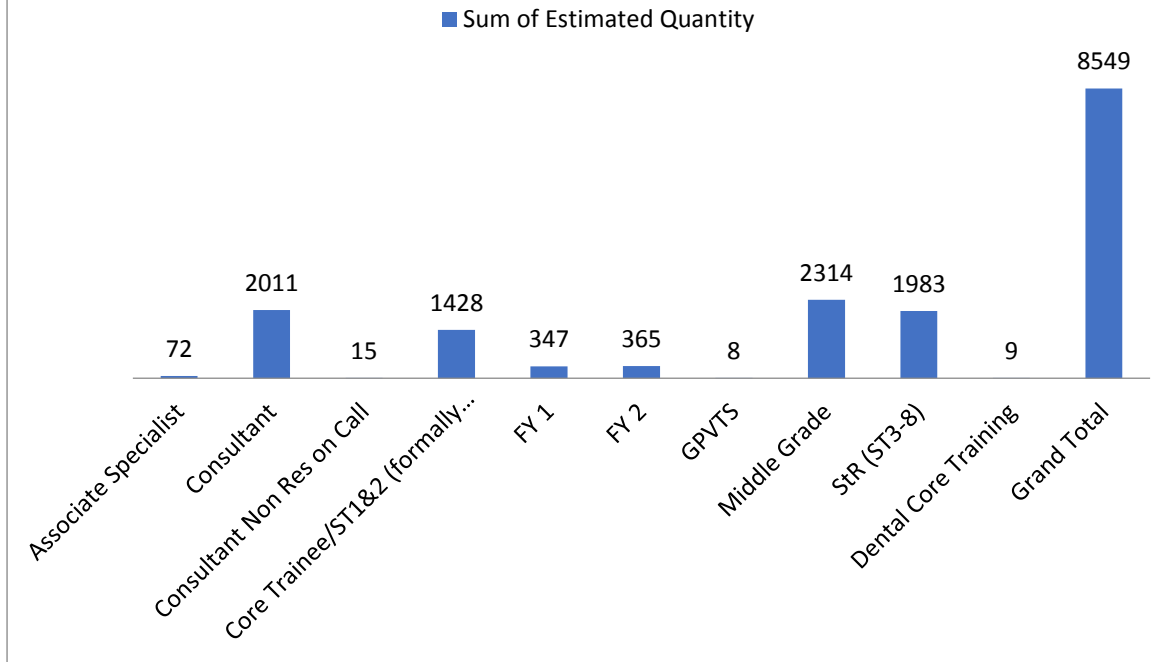
Cross site

| Row Labels | Sum of WTE Budget | Sum of WTE Contracted | Sum of Vacancies WTE |
|--------------------------------|-------------------|-----------------------|----------------------|
| CT1 | 43 | 18.5 | 24.5 |
| FH01 FOUNDATION PROG DOCTORS | 45 | 32 | 13 |
| FH02 FOUNDATION PROG DOCTORS | 32 | 22 | 10 |
| ST 1 LOWER | 14 | 11.81 | 2.19 |
| ST 2 UPPER | 65.8 | 44.03 | 21.77 |
| TRUST SCALE MEDICAL | 41.1 | 48.2 | -7.1 |
| VTS VOCATIONAL TRAINING SCHEME | 16 | 11.21 | 4.79 |
| Grand Total | 256.9 | 187.75 | 69.15 |

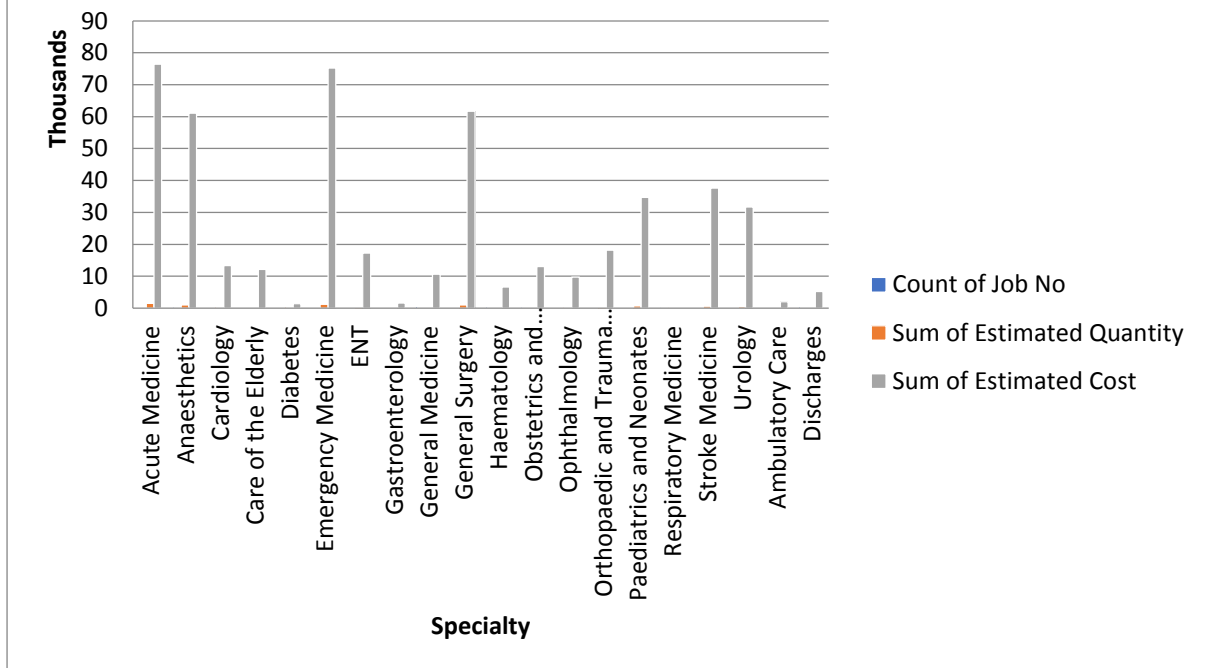
2.Total Internal Locum information from 1st May 2018 to 31st July 2018

May 2018

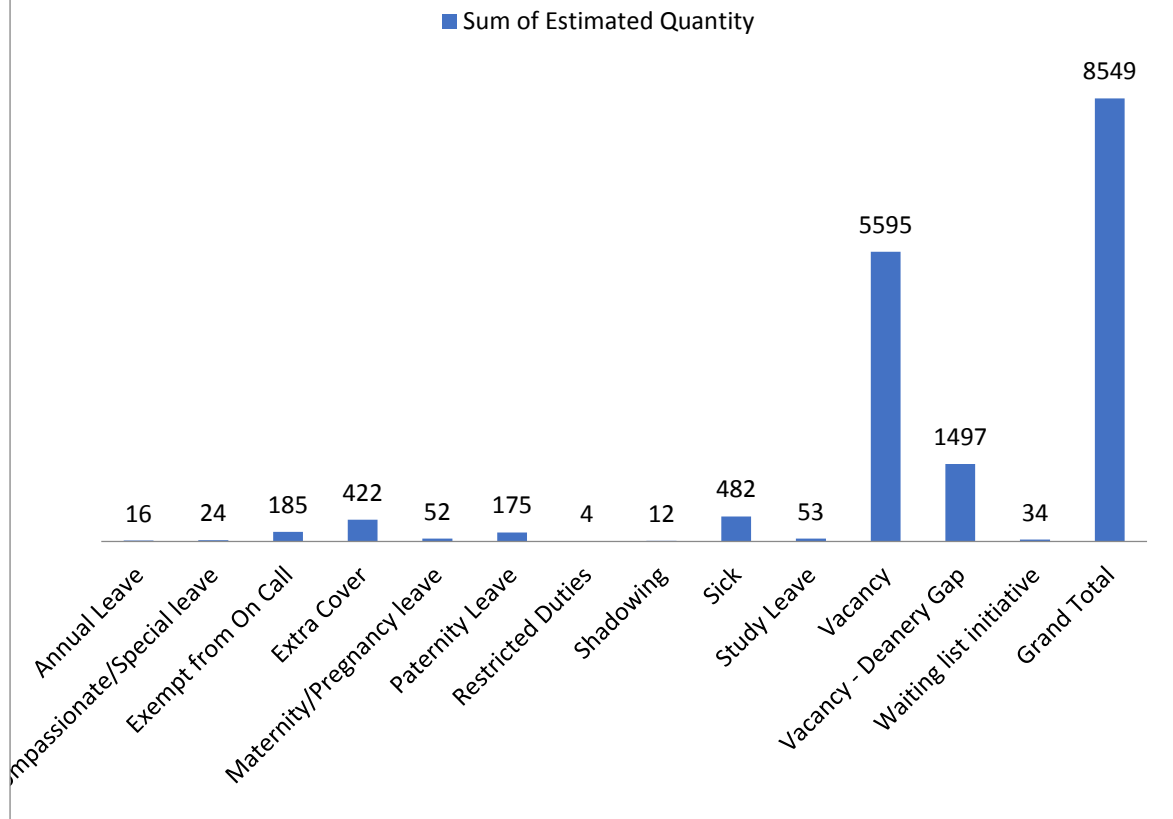
Hours 01.05.2018 - 31.05.2018



Internal bank 01.05.2018 - 31.05.2018

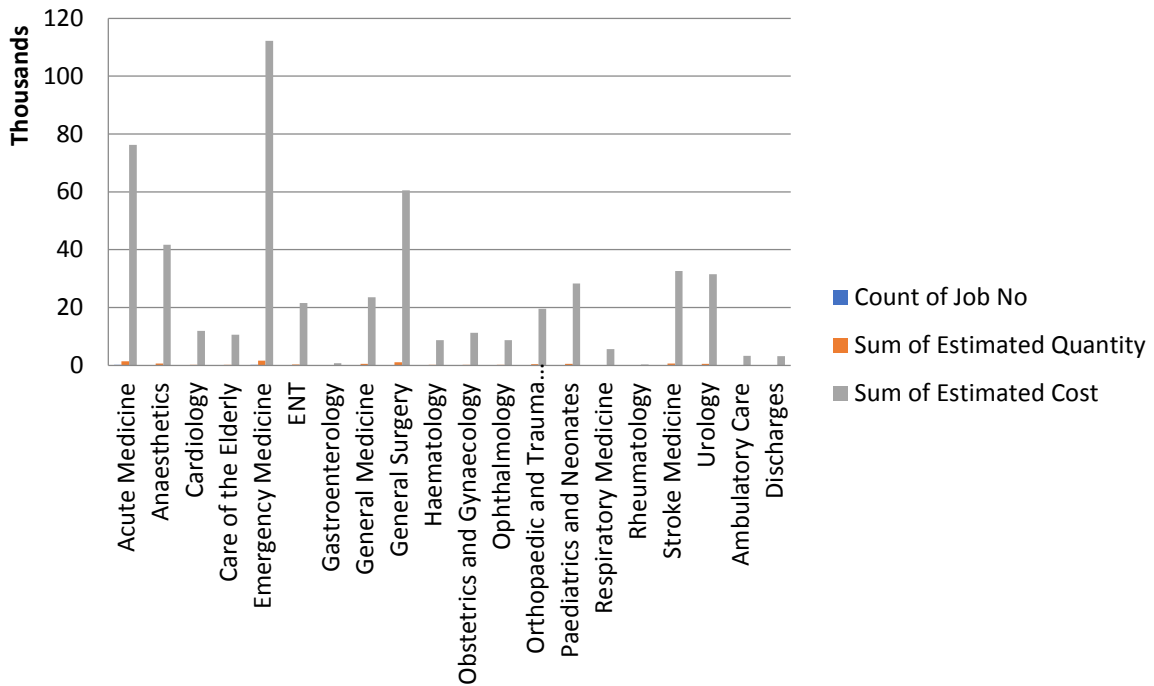


Reason for shift 01.05.2018 - 31.05.2018

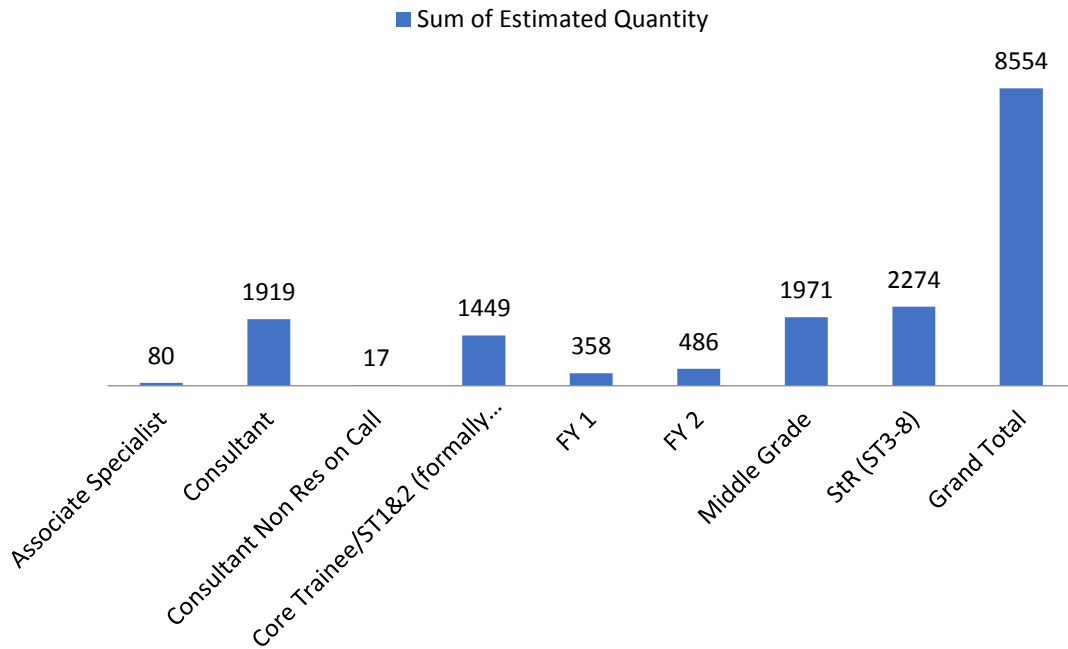


June 2018

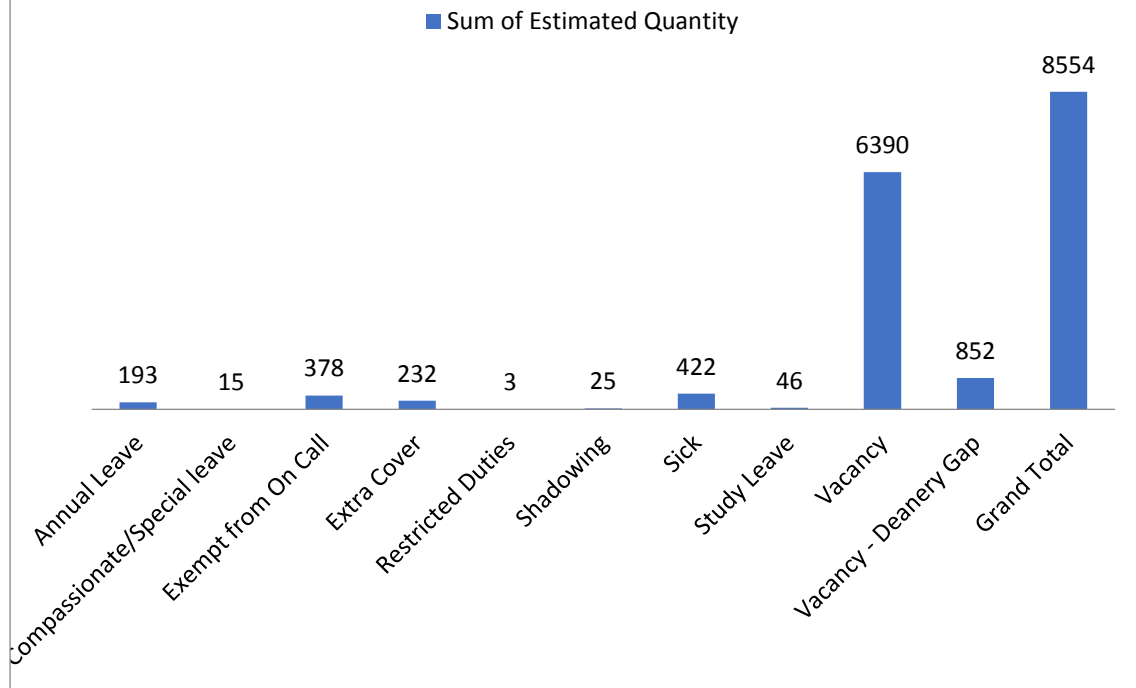
Internal bank 01.06.2018 - 30.06.2018



Hours 01.06.2018 - 30.06.2018

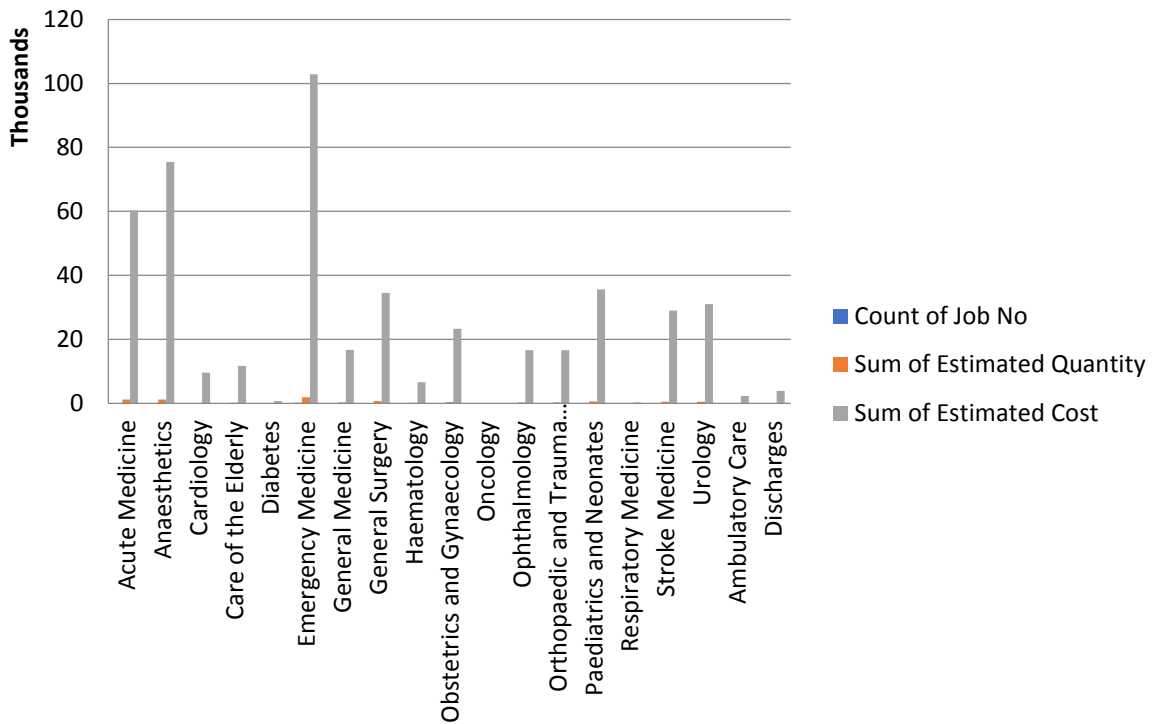


Reason for shift 01.06.2018 - 30.06.2018

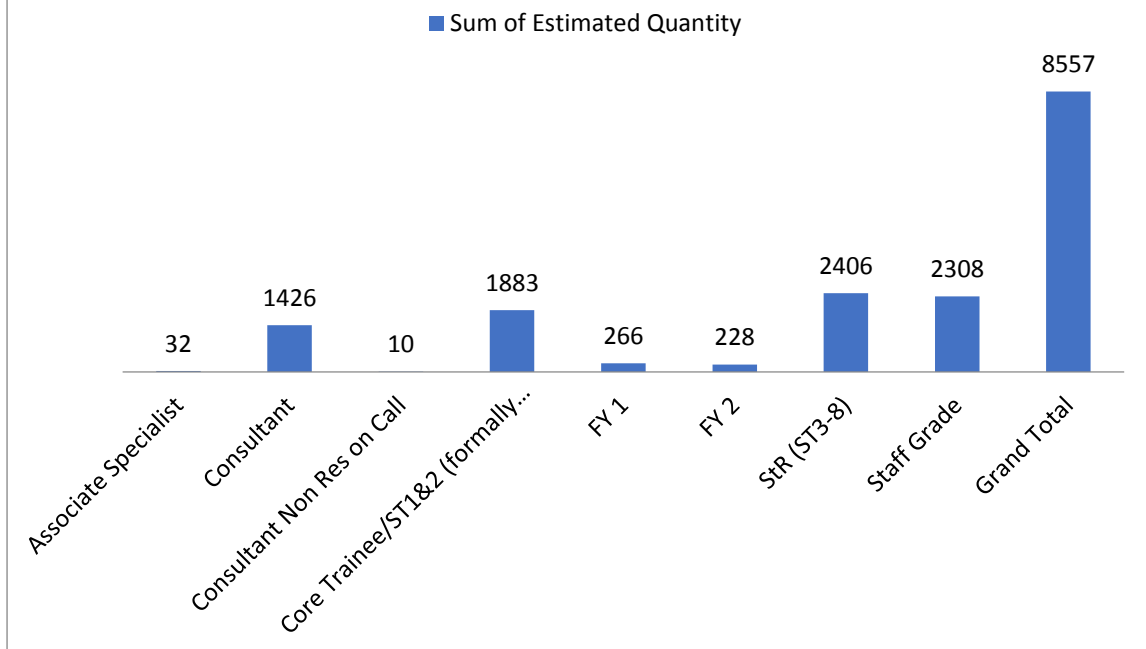


July 2018

Internal bank 01.07.2018 - 31.07.2018



Hours 01.07.2018 - 31.07.2018



Reason for shift 01.07.2018 - 31.07.2018

