

Cover Sheet

Trust Board Meeting in Public: Wednesday 12 May 2021

TB2021.30

Title: Guardian of Safe Working Hours Quarterly Report 2020 – 21
Quarter 4

Status: For Information

History: Quarterly update

Board Lead: Chief Medical Officer

Author: Dr Robert Stuart; Guardian of Safe Working Hours

Confidential: No

Key Purpose: Assurance

Executive Summary

1. This report provides the Trust Board with information around contractually defined 'safe working hours' for OUH Doctors in Training; 2020-21 Quarter 4.
2. Due to COVID-19 and akin to the wider NHS workforce, the service provided by Doctors in Training and the training they received were significantly impacted.
3. This quarter coincided with a transition point in the COVID-19 pandemic; nationally COVID-19 hospital admissions peaked at the beginning of this quarter, but at the end had fallen by about 94%
4. Exception reporting data in this quarter fell within historically normal ranges.
5. In response to previously recognised national challenges around rostering and work schedule governance, a task and finish group commissioned by The Chief People and Chief Medical Officers has started their assignment.
6. Junior doctors, including Doctors in Training working through the Junior Doctor Forum and the Medical Workforce Group have highlighted pockets of leadership provided by Junior Doctors at OUH that is vital and deserves to be better recognised and embedded across the Trust.

Recommendations

7. The Trust Board is asked to receive this report as information provided from within the organisation on the measures being taken in relation to quality assurance and improvement.

Guardian of Safe Working Hours Quarterly Report 2020 – 21 Quarter 4

1. Purpose

1.1. This Quarterly Report on Safe Working Hours for doctors in training (Q4: January to March 2021) is presented to the Board with the aim of providing context and assurance around safe working hours for OUH Doctors in Training (also referred to as 'Trainees' and 'Junior Doctors').

2. Background

2.1. 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 follows:
- 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.
- A consolidated annual report on rota gaps and the plan for improvement to reduce these gaps shall be included in a statement in the Trust's Quality Account, which must be signed off by the Trust Chief Executive. This report shall also be provided to the JLNC, or equivalent.
- Where the Guardian has escalated a serious issue in line with Terms and Conditions paragraph 10(d) and the issue remains unresolved, the Guardian must submit an exceptional report to the next meeting of the Board.
- 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.

2.2. 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

3. Data Report

3.1. High level data – Table 1

Number of OUH employees (approx. total)	12,000
Number of OUH doctors (approx. total)	1,800
Number of doctors in training (approx. total)	895
Number of junior doctor rosters (approx.)	178
• Foundation year 1	88
• Foundation year 2	127
• Core Trainees (medical + surgical)	127
• General Practice	48
• Specialty Trainees	505
Job planned time for Guardian	8 hours / week
Job planned time for educational supervisors	1 hour / junior doctor / week

Data Management

3.2. As previously reported in more detail, the collection and reporting of data relating to the junior doctor workforce continues to be a challenge both locally and nationally.

Exception reports (with regard to working hours)

3.3. A summary table of the exception reports received in Quarter 4 (Jan – March 2021) is attached as Appendix 1.

3.4. Whilst the number of exception reports fell from 107(Q3) to 88 (Q4) most of the data in this quarter fell within historically normal ranges.

3.5. One ‘immediate concern’ was raised in January; ‘SPAs/Trainee Directed Days cancelled in favour of service provision due to Covid-19 pandemic. Exception report filed at request of College Tutor’. On review it was established that the criteria for an immediate concern was not reached however the report was escalated to the Director of Medical Education for information.

3.6. Education exception reporting is monitored by the DME, working closely with GSWH, and is one mechanism, along with local feedback and HEE School surveys, of assessing missed or lost training opportunities.

Locum Bookings / Locum work carried out by Junior Doctors

3.7. A table detailing the locum bookings/locum work (as measured by shifts) carried out in Quarter 4 (Jan – March 2021) is attached as Appendix 2.

3.8. The total use of locums increased from 2778(Q3) to 3007 (Q4).

3.9. ‘Vacancy’ leading to locum booking was about 20% less during this quarter compared to the average for the preceding year.

- 3.10. 'COVID' accounted for the increase use of locums in this quarter (37% of all locum shifts).

Work Schedule Reviews

- 3.11. The Guardian has not requested any 'work schedule reviews' in this quarter.

Rota Gaps/Vacancies

- 3.12. Contractually this report; 'will include data on all rota gaps on all shifts'
- 3.13. There is no central collation of trainee vacancy data. The management of vacancies is largely devolved to a number of individuals who are responsible for managing the 178 junior doctor rotas.

Fines

- 3.14. Contractually; *'the Guardian of safe working hours will review all exception reports* copied to them by doctors to identify whether a breach has occurred which incurs a financial penalty'. In practice this Guardian review is not always possible as the exception reporting software does not reliably identify all types of breach.
- 3.15. Eight exception reports described fineable breaches (6 related to a breach of "maximum 13 hour shift length"). These eight fines were distributed across 4 different specialties and do not appear to be related.
- 3.16. To date for this quarter, six fines have been levied and totalled approximately £700.
- 3.17. Two fines are yet to be levied as additional information has been requested from the doctor and supervisor.

4. Subjective Report

COVID-19

- 4.1. During this quarter there was no nationally agreed derogation of contractual safe working hour's regulations (as there was during the first surge).
- 4.2. This quarter coincided with a transition point in the COVID-19 pandemic; nationally COVID-19 hospital admissions peaked at 4200 patients per day at the beginning of this quarter, but at the end had fallen by about 94% to 250 per day.
- 4.3. The need to respond to the peak of the pandemic whilst complying with national requirements for contractually defined safe working hours and training was acutely challenging during the pandemic with yet to be determined post-pandemic consequences.

Compliance with Safe Working Hours governance

4.4. Meetings chaired by the Chief People Officer with support from the Chief Medical Officer have identified a number of risks associated with rostering and associated processes (nationally recognised challenges). In response, the Chief People Officer has commissioned a task and finish group to review medical electronic rostering systems; to analyse information and oversee a review of the linkage between medical electronic rostering systems. The findings will be presented in a report which provides the findings, a costed solution and timeframes for change.

Junior Doctors Forum

4.5. The Guardian is working with JDF Junior Doctors to identify how JDF meetings could be enhanced by strengthening JDF Junior Doctor leadership and has proposed that the JDF host a JDF development event.

4.6. Two Doctors in Training demonstrated through their pro-active engagement with the Medical Workforce Group meetings (COVID-19 response) that leadership from this group of doctors is vital and deserves to be better recognised and embedded within the Trust's senior leadership structures.

Additional Information

4.7. Concerns about loss of education and training opportunities in Obstetrics and Gynaecology were identified in the Trust Maternity Incentive Report, submitted to Trust Board in March 2021. The Trust was required, under Safety Action 4, to formally record the proportion of Obstetrics and Gynaecology Trainees in their trust who responded 'Disagreed' (27.49%) and 'Strongly disagreed' (24.14%) to the 2019 General Medical Council (GMC) National Trainees Survey question: 'In my current post, educational/training opportunities are rarely lost due to gaps in the rota. The 2019 GMC survey was completed by trainees in 2018.

4.8. Over the last year the trust has worked very closely with trainees and trainers in all specialties and followed national and regional HEE guidance to try to minimise loss of training opportunities including curriculum-aligned experience, training days and self-directed time. College Tutors have tailored rotas and learning opportunities on an individual basis to their trainees so that they could achieve as many of their curriculum-aligned objectives as possible. Trainee forums and junior doctor representation on JDF and Medical Workforce Group have also worked hard to establish ways to improve services and minimise training disruption.

4.9. Work is ongoing both within the trust recovery programmes and with the Deanery / HEE / Heads of School for Training Recovery, to scope, plan and to mitigate any lost training or skills gaps .

- 4.10. The Clinical Director for Maternity, together with the Deputy Director of Medical Education, reviewed trainee rotas within Obstetrics and Gynaecology for the 2020-21 Academic Year. It was established that for ST1/2, GTPVTS and FY2 trainees, rotas were compliant and fully staffed for the year with the exception of January – March 2021 when an emergency rota was introduced due to Covid-19 redeployment and unexpected gaps. There were no rota gaps for ST3-7 grade trainees.
- 4.11. It was further established that prior to the Covid-19 pandemic, trainees required to undertake any short notice changes to training days were offered an alternative, replacement training day.
- 4.12. Exception reports made between 2019-2021 for loss of education opportunities were identified. Only two exception reports were made in this period for this specific reason.

5. Recommendations

- 5.1. The Trust Board is asked to receive this report as information provided from within the organisation on the measures being taken in relation to quality assurance and improvement.

Appendix 1

Summary of OUH exception reports: Jan/Feb/Mar.2021					
		Jan	Feb	Mar	Total
Reports	Grand Total	27	40	21	88
	Closed	27	40	21	88
	Open	-	-	-	-
<i>The data below relates to the 88 closed exception reports only</i>					
Individual doctors / specialties reporting	Doctors	18	9	10	29
	Specialties	11	8	8	16
Immediate concern		1	-	-	1
Nature of exception	Hours & Rest	22	40	21	83
	Education	8	0	2	10
Additional hours ('Hours & Rest' exception reports only)	Hours (plain time)	16.9	50.7	42.5	110.1
	Hours (night time)	5.4	13.9	3.5	22.8
	Total hours	22.3	64.6	46.0	132.9
	Hours per exception report	1.0	1.6	2.2	1.6
Response	Agreed	27	40	21	88
	Not Agreed	-	-	-	-
Agreed Action ('No action required' is the default action for 'education' exceptions)	Time off in lieu	18	32	10	60
	Payment for additional hours	2	7	9	18
	No action required	7	1	2	10
Grade	F1	10	17	5	32
	CMT	4	19	1	24
	StR	10	4	9	23
	F2	3	-	4	7
	GPVTS	-	-	2	2
Exception type (more than one type of exception can be submitted per exception report)	Late finish	16	38	20	74
	Unable to achieve breaks	1	18	10	29
	Early start	2	4	7	13
	Unable to attend scheduled teaching/training	7	0	2	9
	Difference in work pattern	5	1	0	6
	Exceeded the maximum 13-hour shift length	2	4	0	6
	Minimum 11 hours rest between shifts	1	2	1	4
	Request a work schedule review	1	-	-	1
	Unable to attend clinic/theatre/session	1	-	-	1
Specialty	Medical Oncology	6	3	8	17
	Cardio-vascular disease	3	9	4	16
	General Medicine	4	10	-	14
	Infectious diseases	-	10	2	12
	General Surgery	-	4	1	5
	Anaesthetics	4	-	-	4
	Cardiology	2	2	-	4
	Neonatal medicine	2	1	-	3
	Accident and emergency	1	-	1	2
Cardio-thoracic Surgery	2	-	-	2	

Geriatric Medicine	-	-	2	2
Transplant	-	-	2	2
Urology	1	-	1	2
Adult Intensive Care Unit	-	1	-	1
Gastroenterology	1	-	-	1
Obstetrics and gynaecology	1	-	-	1

Appendix 2

Summary of OUH Locum Filled Shifts: Jan/Feb/Mar.2021					
		Jan	Feb	Mar	Total
Locum Shifts	Total	950	792	717	2459
	Bank	734	656	557	1947
	Agency	216	136	160	512
Grade	Core	486	334	386	1206
	Specialty	346	358	239	943
	Foundation	77	81	76	234
	Pandemic Junior Doctor	24	19	16	59
	Blank	17	-	-	17
Specialty (top 20 specialties only)	Orthopaedic and Trauma Surgery	216	146	181	543
	Emergency Medicine	120	109	120	349
	General Surgery	83	126	115	324
	Acute Medicine	162	84	73	319
	Cardiothoracic Surgery	29	39	32	100
	Medicine	42	23	26	91
	Neurosurgery	39	31	11	81
	Haematology	25	23	31	79
	Oncology	20	18	26	64
	Renal Medicine	27	13	14	54
	Paediatric Surgery	18	14	21	53
	Oral and Maxillofacial surgery	21	12	11	44
	ENT	14	23	2	39
	Palliative Medicine	17	8	12	37
	Urology	5	14	13	32
	Care of the Elderly	20	7	3	30
	Vascular Surgery	19	10	-	29
	Paediatrics	5	17	6	28
Obstetrics and Gynae	7	18	1	26	
Anaesthetics and Cardiac	-	22	-	22	
Reason	Vacancy	628	507	493	1628
	Other	80	91	56	227
	Extra Cover	67	62	67	196
	Self Isolation Covid	46	66	52	164
	Sick	102	30	25	157
	Covid	-	24	15	39
	Paternity Leave	16	4	9	29
	Pregnancy/Maternity Leave	7	6	-	13
	Study Leave	4	1	0	5
	Compassionate/special leave	-	1	-	1
	Annual Leave	-	-	-	0
	Exempt from On Calls	-	-	-	0
Division	Medicine Rehabilitation and Cardiac	380	295	257	932
	Neurosciences Orthopaedics				
	Trauma Specialist Surgery	357	273	244	874
	Children's and Neonates				
	Surgery Womens and Oncology	208	222	216	646
Clinical Support Services	5	2	-	7	