

## Trust Board – 27<sup>th</sup> October 2020

### Guardian of Safe Working Hours - Quarterly Report (August 2020 – October 2020)

#### Purpose of the report

- Provide assurance to the Trust Board that doctors in training in LPT are safely rostered and have safe working hours that comply with the Terms and Conditions of Service
- 18 Exception Reports have been raised in this period. This indicates a variance from the agreed work schedule. This report highlights the action being taken to address this.
- This report is supplied to the Board to comply with the TCS (Sch. 06, 11a – *The Board must receive a Guardian of Safe Working Report no less than once per quarter*)

#### Analysis of the issue

##### Exception Reports

Exception reporting is the mechanism for all doctors employed on the 2016 Junior Doctors Contract to inform the Trust when their day to day work varies significantly and/or regularly from the agreed work schedule. The reports are raised electronically using the “Allocate” rostering system. All reports are received by the Medical Staffing team, the Guardian of Safe Working Hours and the Consultant supervisor for the individual trainee. Once received the Consultant supervisor discusses with the trainee to reach an agreed outcome which is subsequently logged on the Allocate system.

Since 1<sup>st</sup> August 2020, 18 exception reports have been logged. Summary as follows, with a full breakdown in Appendix 1.

- 8 exceptions relating to the Evington on call rota
- 7 exceptions relating to the Specialty Registrar (StR) on call rotas
- 2 exceptions relating to the Bradgate shift rota
- 1 exception relating to the Foundation Year 1 Twilight rota

Of these reports:

- 2 relate to shifts over running (one by 30 minutes, one by 60 minutes)
- 16 relate to a breach in rest requirements.

The StR rota has been a non-resident on call working pattern for at least the last 20 years. Expected rest whilst on call is 8 hours per 24 hour period, of which at least 5 hours should be continuous and occur between 22.00 and 07.00. If it is expected that this will not be met, the day after must not exceed 5 hours. In all exception reports logged relating to the StR rota, 5 hour continuous rest has not occurred between 22.00 and 07.00. This is predominately due to the increased number of Mental Health Act Assessments (MHAA) required overnight. Current practice requires both doctors for the MHAA to be supplied by LPT thus both East and West StR are called out. Previously, and in other Trusts, agreement has been that one doctor is the on call StR and the second doctor is sourced

by the AMHP from a separate rota. Although this has been discussed there is unlikely to be a change to how doctors are allocated to a MHAA call due to a whole system workforce supply issue.

The Evington rota became a non-resident on call working pattern from 5<sup>th</sup> August 2020. This was implemented on a trial basis followed a consultation exercise. However, due to an increase in admissions to the Evington Centre, related to Covid-19, the shifts covered by the trainees have become very busy. In all exception reports logged relating to the Evington rota, 5 hours continuous rest has not occurred between 22.00 and 07.00.

### Risk

The current issues present the following key risks for the Trust:

- Services are unable to meet safe staffing requirements – alignment to SUTG High Standards objective
- Insufficient staffing levels to meet capacity and demand and provide quality services – alignment to SUTG Equality, Leadership and Culture objective
- The health and well-being of our staff is not maintained and improved – alignment to SUTG Equality, Leadership and Culture objective
- Delayed access to assessment and treatment impact on patient safety and outcomes – aligned to SUTG Access to Services objective

There is also a financial implication and risk that a Guardian of Safe Working fine will be applied if the matter is not resolved.

## **Proposal**

### Mitigation

A small working group has been established to resolve work intensity/requirements for rest for the StRs. Next day compensatory rest is provided to address rest breaches. Hotel accommodation is available if a doctor feels unsafe to drive home after an on call duty. A consultation exercise through the Trust Management of Change policy will commence to gather feedback on the transition to a full shift pattern for the StR workforce.

Next day compensatory rest is also provided to trainees on the Evington rota that do not achieve rest overnight. In addition, detailed activity data is being collected from trainees on the Evington rota to further understand causes for overnight disturbances. It has been identified that some calls to the on call doctor are inappropriate. Trigger thresholds have therefore been amended. Work intensity will be closely monitored and the rota may change back to a full shift working pattern in the near future.

## **Decision required**

Despite the increase in the number of exception reports received in this quarter, the Board can take assurance that the issues are understood and action is being taken to resolve the variance from the agreed work schedules for medical trainees working on the Evington rota and StR rota.

The trainees are engaged in discussions through increased attendance at the Junior Doctor Forum, last held on 1<sup>st</sup> July 2020.

The following actions are being implemented and considered:

- Small working group to include the Director of Medical Education, Guardian of Safe Working Hours, Medical Staffing Manager and StR reps, continues to meet to agree practical solutions to address overnight work intensity. This working group reports into the Junior Doctors Forum for oversight and sign off.
- Next day compensatory rest continues to be provided to any trainee that is unable to take the required rest overnight.
- Hotel accommodation continues to be provided to any trainee that feels unsafe to travel home after an on call duty.
- Communication to medical trainees on the Evington rota that the non resident on call trial has not been successful and that the rota will revert back to a full shift at the next rotation on 3<sup>rd</sup> February 2021.

The risks if the above actions are not supported could include:

- Impact on the health, well-being and safety of the care giver i.e. medical trainee
- Risk of burn out to the affected medical trainees
- That the rota is not compliant with the Junior Doctors Terms and Conditions of Service. Compliance can prevent guardian fines being levied.

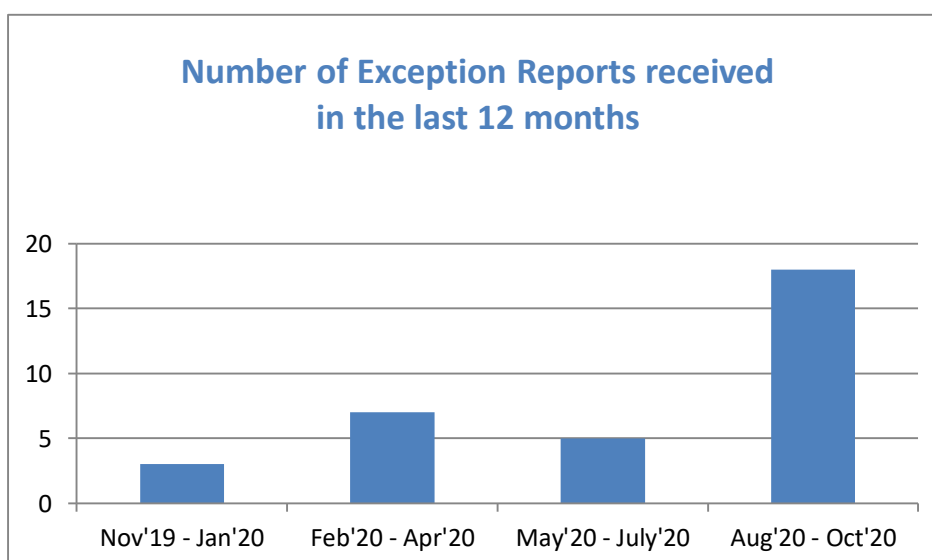
The Board is asked to support the above actions.

A follow up progress report will be provided in January 2021 in order to provide assurance to the Board that doctors in training in LPT are safely rostered and have safe working hours that comply with the Terms and Conditions of Service

## Log of Exception reports – 1<sup>st</sup> August 2020 – 31<sup>st</sup> October 2020

Date of Issue	Rota	Trainee Level	Reason for Breach	Resolution
04/08/20 Tues	StR West	StR	Rest (note 1)	Compensatory rest taken
10/08/20 Mon	Bradgate B	FY2	Rest (note 1)	Compensatory rest taken
18/08/20 Tues	StR West	StR	Rest (note 1)	Compensatory rest taken
22/08/20 Sat	Evington	CT	Rest (note 1)	Compensatory rest taken
23/08/20 Sun	Evington	CT	Rest (note 1)	Compensatory rest taken
29/08/20 Sat	Evington	CT	Rest (note 1)	Compensatory rest taken
30/08/20 Sun	Evington	CT	Rest (note 1)	Compensatory rest taken
31/08/20 Mon	Evington	CT	Rest (note 1)	Compensatory rest taken
01/09/20 Tues	F1 Twilight	FY1	Shift overran 1 hour	Compensatory rest taken
01/09/20 Tues	StR East	StR	Rest (note 1)	Compensatory rest taken
01/09/20 Tues	Evington	CT	Rest (note 1)	Compensatory rest taken
01/09/20 Tues	StR West	CT	Rest (note 1)	Compensatory rest taken
02/09/20 Wed	Evington	FY2	Rest (note 1)	Compensatory rest taken
04/09/20 Fri	StR West	StR	Rest (note 1)	Compensatory rest taken
08/09/20 Tues	Evington	CT	Rest (note 1)	Compensatory rest taken
12/09/20 Sat	StR West	StR	Rest (note 1)	Compensatory rest taken
16/09/20 Wed	Bradgate B	CT	Shift overran by 30 minutes	Compensatory rest taken
21/09/20 West	StR West	StR	Rest (note 1)	Compensatory rest taken

Note 1 - Expected rest whilst on call is 8 hours per 24 hour period, of which at least 5 hours should be continuous and occur between 22.00 and 07.00. In highlighted cases 5 hour continuous rest has not occurred between 22.00 and 07.00



## Governance table

<b>For Board and Board Committees:</b>	Trust Board	
<b>Paper sponsored by:</b>	Dr Avinash Hiremath, Medical Director	
<b>Paper authored by:</b>	Angela Salmen, Medical Staffing & Revalidation Support Manager	
<b>Date submitted:</b>		
<b>State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):</b>	None	
<b>If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:</b>	n/a	
<b>State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning</b>	Quarterly report. Next report will be in January 2021.	
<b>STEP up to GREAT strategic alignment*:</b>	High Standards	x
	Transformation	
	Environments	
	Patient Involvement	
	Well Governed	
	Single Patient Record	
	Equality, Leadership, Culture	x
	Access to Services	x
	Trustwide Quality Improvement	
<b>Organisational Risk Register considerations:</b>	List risk number and title of risk	4 – Service are unable to meet safe staffing requirements; 26 – Insufficient staffing levels to meet capacity and demand and provide quality services; 27 – The health and well-being of our staff is not maintained and improved 28 – Delayed access to assessment and treatment impacts on patient safety and outcomes.
<b>Is the decision required consistent with LPT's risk appetite:</b>	Yes	
<b>False and misleading information (FOMI) considerations:</b>	None	
<b>Positive confirmation that the content does not risk the safety of patients or the public</b>	Yes	
<b>Equality considerations:</b>	None	