

**UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST  
CLINICAL QUALITY COMMITTEE  
THURSDAY 25 OCTOBER 2018**

<b>Title:</b>	<b>ANNUAL BOARD REPORT FROM UHB GUARDIAN OF SAFE WORKING PERIOD AUG 2017- AUG 2018</b>
<b>Responsible Director:</b>	Tim Jones, Executive Director of Workforce & Innovation
<b>Contact:</b>	Ext 14337

<b>Purpose:</b>	To present the Annual Board Report from the UHB Guardian of Safe Working (GSW)	
<b>Confidentiality Level &amp; Reason:</b>	N/A	
<b>Annual Plan Ref:</b>	9.3 Develop and deliver the Trust's junior doctor strategy.  To deliver high quality education and training to meet the needs of patients, staff and the organisation.	
<b>Key Issues Summary:</b>	<ul style="list-style-type: none"> <li>• There is a requirement of the new junior doctor contract to establish the post of Guardian of Safe Working (GSW) charged with the responsibility of ensuring that issues of compliance with safe working hours are addressed as appropriate.</li> <li>• The GSW is required to submit a report at least quarterly together with an aggregated annual report to the Trust board.</li> <li>• This report provides an analysis of exception reports submitted by junior doctors for this period.</li> </ul>	
<b>Recommendations:</b>	The Board is asked to ACCEPT the contents of the Report.	
<b>Approved by:</b>	Tim Jones	Date: 17 Oct 2018

**UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST  
QUEEN ELIZABETH HOSPITAL BIRMINGHAM**

**ANNUAL BOARD REPORT FROM TRUST GUARDIAN OF SAFE  
WORKING PERIOD AUG 2017- AUG 18**

**Presented by: Executive Director of Workforce & Innovation**

**1. Introduction**

The GSW is a requirement of the new Junior Doctor Contract and is a senior appointment charged with the responsibility of ensuring that issues of compliance with safe working hours are addressed as appropriate; the GSW shall provide assurance to the Trust Board in this regard.

Dr Jason Goh was appointed as UHB GSW in October 2016 and following the merger of QEHB and HGS was reappointed as overall UHB Trust Guardian on August 2018. This paper outlines the progress of the Guardian over the period in overseeing safe working practices through Exception Reporting for Junior Doctors in Training across Queen Elizabeth Hospital and the wider issues relating to the management of Exception Reporting across the whole University Hospitals Birmingham Trust.

Quarterly reports for QEHB to the Board of Directors have been produced throughout the 2017-2018 period and these have been incorporated into the Safer Staffing section of the performance indicators report.

**2. Exception Reporting (ER) progress report (2 Aug 2017- 31<sup>st</sup> July 2018)**

2.1 Exception reports (ER) may be raised where a junior doctor in the following categories:

- Safe Working (hours/breaks)
- Educational opportunities
- Work patterns
- Support during service commitments

Appendix 1a: Junior Doctor QEHB Exception reports for annual period by outcome (attached).

Appendix 1b: Junior Doctor HGS Exception reports for annual period by rota (attached).

Table 1: Outcome of QEHB Exception Reports Summary:

<b>TABLE 1:</b>			
<b>ER type:</b>	<b>Number:</b>	<b>Outcome:</b>	
Hours	94	38	Time off in lieu
		39	Overtime payment
		17	No further action
Pattern	12	2	Time off in lieu
		4	Overtime payment
		6	No further action
Service Support	3	3	No further action
Educational	16	1	Time off in lieu
		1	Overtime payment
		5	No further action
		8	Organisational change
		1	Prospective change to work schedule
<b>Total Number of ERs (in period):</b>	<b>125</b>		
<b>Total number of ERs 'completed' (in period)</b>	<b>125</b>		

2.2 QEHB Compensations:

Approved time off in lieu (TOIL): 4605 mins  
 Approved for payment: 7280 mins

2.3 QEHB Fines Levied

There were two fines levied during this period; these both related to lack of a resident doctor overnight in Oncology/Haematology due to sickness. Resident cover was provided by the non-resident on all StR which caused a breach in the rest requirements. The total values of fines were £2,892.79 of which £1,568.62 was deposited with the Guardian of Safe working. A work schedule review has resulted in a second resident CT level doctor incorporated into the overnight cover with effect from August 2018 to safeguard against gaps in overnight cover and improve patient care.

2.4 QEHB Immediate Safety Concerns:

Ten ISCs were recorded by the Junior Doctors during the period, all were examined by a specialty consultant and/or the Guardian of Safe Working within 24 hours and no safety concerns were identified.

### 3. QEHB Trends and Work Schedule Reviews:

Table 2: Summary of significant trends and work schedule reviews

<b>TABLE 2:</b>			
<b>Rota ID:</b>	<b>ERs:</b>	<b>Issues:</b>	<b>Resolutions:</b>
QE Liver/Vasc Surgery Foundation RRK018	25	Significant unauthorised workovers pre-Feb 18. High workload late in day.	<b>Work Schedule review:</b> Increased eve cover on rota. Implemented handover process with StR.
QE Med CMT RRK021	18	Workload & sick patients Unable to attend teaching (ward 513)	Payment or TOIL granted where workover in accordance with Trust policy. Missed teaching compensated by TOIL for e-learning at instruction of DME.
QE Medicine Foundation RRK017	17	Workload & sick patients Covering sickness gaps	Payment or TOIL granted where workover in accordance with Trust policy.
QE T&O CT RRK057	10	Unequal morning workload across teams Inaccurate/unfounded exception reports	<b>Work Schedule review:</b> Daily duty reg. Re-allocation of patients across teams. JD guidance on ERs.
QE Medicine CDU Junior RRK063	8	Workload Covering sickness gaps	<b>Work Schedule review:</b> TOIL granted where workover in accordance with Trust policy. Adjustment of rota
QE Surg/Urol F1 RRK024	7	Workload Incorrect work pattern Unable to attend teaching	<b>Work Schedule review:</b> Correct work pattern re-established. Additional JD assigned to facilitate Thurs teaching attendance.
QE ENT St3+ RRK048	5	Challenge: Excessive out of hours activity	<b>Work Schedule review:</b> Activity recording exercise confirmed activity within thresholds
QE Onc/Hearm CT RRK037	2	Sickness out of hours resulting in the oncall SpR residency – led to hours breach & GSW fine.	<b>Work Schedule review:</b> A second resident CT level doctor incorporated into the overnight cover with effect from August 2018.

#### 3.1 Education Exception Reports:

There have been an increased number of educational exception reports relating to inability to attend teaching due to lack of cover on the wards; this has been particularly problematic in Diabetes -ward 513 due to low levels of staffing. Some junior doctors affected have since been granted time off in lieu by the DME to enable them to undertake e-learning in place of missed teaching attendance. The issue regarding appropriate staffing level is currently with the CSL and Divisional Director.

#### **4. Guardian's Exception Reporting Review Group QEHB**

The Guardian's Exception Reporting Review Group (GERRG) meeting were held during the period as follows:

- 24 Aug 2017
- 6 Nov 2017
- 6 Feb 2018
- 8 May 2018

Junior Doctors and LNC representatives were engaged in discussions on common trends and difficulties in Exception Reporting and ideas for improvements. The use of income incurred from fines was also discussed (meeting notes available).

#### **5. Summary of next steps:**

##### **5.1 HGS Safe Working and Exception Reporting:**

A Deputy Guardian of Safe Working (DGSW) has now been appointed to oversee safe working at Heartlands, Good Hope and Solihull hospitals, this post will be accountable to the GSW. The current policies and procedures relating to template rota management, safe working and exception reporting in place at QEHB will be rolled out across HGS. From 1 August 2018 HGS data will be incorporated into the quarterly and annual ER reports.

At 31 July 2018 there were 186 HGS junior doctor Exception Reports (ERs) - 95 of these requiring attention; 39 '*unresolved*' (awaiting '*junior doctor agreement*') exception reports have since been closed as complete. Currently there are 62 HGS exception reports up to 31 July 2018 '*pending supervisor attention*'; 53 of these relate to additional time worked totalling 6,970 mins. It is proposed that this additional work be accepted and paid retrospectively to the junior doctors. The other 9 '*pending*' exception reports require further investigation.

##### **5.2 Engagement of Junior Doctors:**

Implementation of the New Contract was underpinned at QEHB by induction and briefing sessions for junior doctors. Quarterly reports are regularly communicated to JDs at Forum meetings and via the Guardian Exception Reporting Review Group. There remains a need to educate the doctors on exception reporting both in terms of process and what constitutes an exception. A programme of briefing for Junior Doctors and Supervisors on HGS sites is being organised.

Through the QEHB GERRG, the GSW has also worked with junior doctor BMA and LNC representatives to fine tune process. Junior doctors continue to voice concerns over the required authorisation to work excess hours however the Trust has re-iterated the need to retain this level of overtime approval. QEHB Consultant ER leads have taken a practical approach to this and as a result there have been no challenges or disputes relating to workover approvals.

- 5.3 Engagement of Employer (Board, Divisional Managers, Consultants):  
The GSW and DGSW will continue to engage with the relevant stakeholders in the Trust to evolve the process. The appointment of QEHB Exception Report Leads within specialties (Consultants) has been very successful; these consultants have developed expertise in managing the process and are able to make swift and impartial judgements on exception report with support from the GSW team. This process will be extended to HGS.
- 5.4 Administrative Support:  
The current administration team support rota management and exception reporting for circa 500 QEHB Junior Doctors in Training/86 rotas; acquisition of this work stream for HGS will result in circa 1000 junior doctors/150 rotas. To deliver this service across all sites additional administrative support and expertise will be required.

## 6. Recommendations

The Board is asked to:  
**ACCEPT** the contents of the Report.

Tim Jones, Executive Director of Workforce & Innovation