

Report to:	Trust Board (Public)	Agenda item:	SFT4077
Date of Meeting:	02 August 2018		

Report Title:	Annual Report of the Guardian of Safe Working, June 2017 – July 2018			
Status:	Information	Discussion	Assurance	Approval
	X			
Prepared by:	Juliet Barker, Guardian of Safe Working			
Executive Sponsor (presenting):	Paul Hargreaves, Director of Organisational Development & People			
Appendices (list if applicable):				

Recommendation:
To note the annual report of the Guardian of Safe Working June 2017 – July 2018.

Executive Summary:
<p>The Guardian of Safe Working is required to report annually to the Trust Board on rota gaps, exception reporting activity and financial implications.</p> <p>The annual report is attached.</p> <p>Key issues within the annual report include:</p> <ul style="list-style-type: none"> • Significant rota gaps at junior and senior trainee level • Majority of exception reporting is within the medical specialty, in particular gastroenterology • Trainee doctors routinely stay unacceptably late post night shifts. Further action is required to resolve this

Board Assurance Framework – Strategic Priorities	Select as applicable
Local Services - We will meet the needs of the local population by developing new ways of working which always put patients at the centre of all that we do	<input type="checkbox"/>
Specialist Services - We will provide innovative, high quality specialist care delivering outstanding outcomes for a wider population	<input type="checkbox"/>
Innovation - We will promote new and better ways of working, always looking to achieve excellence and sustainability in how our services are delivered	<input type="checkbox"/>
Care - We will treat our patients, and their families, with care, kindness and compassion and keep them safe from avoidable harm	<input type="checkbox"/>
People - We will make SFT a place to work where staff feel valued and are able to develop as individuals and as teams	<input checked="" type="checkbox"/>
Resources - We will make best use of our resources to achieve a financially sustainable future, securing the best outcomes within the available resources	<input type="checkbox"/>

Guardian of Safe Working Hours Annual Report. June 2017 – July 2018

Executive summary

Exception reporting from doctors has come almost exclusively from medical doctors.

17 reports have come from specialties other than medicine.

The main area of concern is gastroenterology.

The exception reports pertain almost exclusively to overtime hours worked after a shift on a week day.

There are 3 reports detailing lack of supervision, 1 detailing missed breaks and 7 detailing missed educational opportunities.

There have been 328 reports detailing 466h overtime. 41 of these reports have resulted in TOIL rather than overtime payment. 272h has been paid as overtime.

The cost of overtime in the last year has come to approximately £4,000 and the total fines levied to approx. £1000. These figures don't include NI or pension contributions from the trust.

Many exception reports are still incomplete, so figures are an estimate. Exception report system does not allow me to see if overtime has been claimed or merely reported.

There are significant rota gaps at junior and senior level.

High level data

Number of doctors including training and trust grade (total): 243

Number of doctors in training on 2016 TCS (total): 180 (inc GPVTS)

Rota Gaps

Junior Grades total of 91 months gap across all specialties at junior level (7.5WTE)

Specialty	Grade	Months	Total Months
ED	GPVTS	Feb – July 2018	6
Anaesthetics	CT1	Aug – Feb	6
	CT2	Aug – Feb	6
Dental	TG	Aug-Dec	6
Resp	F2	Dec- July	5
GIM	CT2	Apr – July	8

Ortho	CT	Aug – July	12
Plastics	F2	Apr – July	4
	ST2	Aug – Feb	6
Psych	F2	Dec – Apr	4
Primary Care	F2	Dec – Apr	4
Spinal	TG	Aug – July x2	24

Senior Grades (ST3+) total of 63 months gap across all specialties at senior level (5.25 WTE)

Specialty	Months	Total Months
Gastro	August	1
Obs&Gynae	Aug – Sept x2	4
Oral	Sept – July	11
	Mar – July	5
Gen Surgery	Oct – July	10
	Apr – July	4
Plastics	Nov – Apr	8
	Nov – July	8
Radiology	April	1
Spinal	Oct – July	11

Significant rota gaps especially at junior level. Some of these gaps due to maternity leave but most are unfilled posts. Several trainees are less than full time.

Summary of Exception Reports Received

	6 th April – 11 th August 2017 (4 months)	2 nd Aug 17 – 6 th Nov 2017 (3 months)	7 th Nov2017 – 10 th May 2018 (6 months)	11 th May – 6 th July 2018 (2 months)
Number of exceptions	28	61	153	57
Total overtime (h)	43.5	81	250	76.3
Average overtime per report	1h36m	1h23m	1h30m	1h38m

Actions Taken to Resolve Issues

Work schedule review in gastro pending.

Considered alteration in shift start/finish times to ease the difficulty leaving on time after a night shift.

More middle grade doctors to start in August to create some slack in AMU coverage.

Points to Consider

Although there are infrequent fines for breaching the 48h working week, there is repeated, frequent low level overtime worked.

I am not convinced that the 72h in 7 days rule is not breached- but I have no way of assessing this from reports and have not been directly informed of it happening. Ditto missing breaks.

Limited scope to provide time in lieu for overtime. Becomes expensive in terms of overtime payments and fines levied. Surgery more able to give TOIL

Main thrust of reports is either not enough hands to do the job or too many patients.

Juniors frequently leaving weekend post-take WR late (should be 0900, often as late as 1000 or 1100). A Clinical Director has spoken to consultants en masse, with seemingly little effect.

Reports from juniors that they feel unsupported/penalised to exception report in some specialties.

Many reports incomplete – both juniors and consultants responsible.

Significant rota gaps – I believe that Salisbury is ‘under doctored’ as a hospital, and Wessex is ‘under doctored’ as a region.