

**REPORT TO THE TRUST BOARD: PUBLIC
23 MAY 2019**

Title	Annual Report on Safe Working Hours: Doctors in Training 1 April 2018 – 31 March 2019
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Purpose of the Report

The Board is asked to note the annual report from the ELFT Guardian of Safe Working Hours which provides data about the number of junior doctors in training in the Trust and any issues arising from transition to the 2016 Junior Doctor contract which was fully implemented in ELFT in September 2017. The report details arrangements made to ensure Safe Working within the new contract and arrangements in place to identify, quantify and remedy any risks to the organisation.

Summary of Key Issues

- The overall vacancy rate remains high at 11%
- Qualitative data reveals high demand on junior doctors in some posts.
- No work schedule reviews or fines have been issued in the Trust for serious breaches of working hour rules.
- The risk to the Trusts is of trainees electing to train elsewhere.
- Efforts are ongoing to create a supportive environment for junior doctors with an active junior doctor forum, engagement activity from medical education department, and promotion of exception reporting and active timetable reviews. The forum has also conducted a review of on call rest facilities and advised on issues related to timely access to on call rotas.
- In individual posts, timetables have been adjusted as a result of reports. Trainees have led on identifying barriers to choosing particular directorates for training posts. CAMHS trainees have been able to conduct an audit of overall workload while on call and are due to present findings and consider the need for alteration to the rota.

Strategic priorities this paper supports (Please check box including brief statement)

Improved patient experience	<input type="checkbox"/>	
Improved staff experience	<input checked="" type="checkbox"/>	Provides assurance about monitoring of working hours with impact on junior doctor staff satisfaction.
Improved value	<input type="checkbox"/>	
Improved population health outcomes	<input type="checkbox"/>	

Committees/Meetings where this item has been considered

Date	Committee/Meeting
N/A	N/A

Implications

Equality Analysis	This report has no direct impact on equalities.
Risk and Assurance	Risks are associated with rota gaps and assurance will be provided through monitoring.
Service User/Carer/Staff	No concerns noted at present.
Financial	There are no financial implications attached to this report.
Quality	No concerns noted at present.

Supporting Documents and Research material

a. N/A

1.0 Introduction

- 1.1 This is the second annual report of Guardian of Safe Working Hours at ELFT to be presented to the Board.
- 1.2 The report has been prepared by the interim Guardian and covers reporting submitted from 1 April 2018 to 31 March 2019.
- 1.3 The board is asked to note the information contained in the report including risks associated with vacant trainee posts and rota gaps, and reports of heavy demand on services which impacts training and safety.

2.0 High level data for ELFT Employed Trainees

- 2.1 There are (as of 31 March 2019) 173 training posts for junior doctors in the Trust. 159 posts are filled as of 31 March 2019. Over the period of the report the vacancy rate has been between 10 and 11%. The highest number of vacancies has been on the higher trainee rota in Newham.

Grade	Number of posts for doctors (total) as of 31 March 2019		
	London	Beds & Luton	Total
FY 1 - 2	17	9	26
GP	14	10	24
CT1-3	47	7	54
ST4-6	57	10	67
		TOTAL	173

Grade	Number of doctors in training on 2016 TCS in post (total) as of 31 March 2019		
	London	Beds & Luton	Total
FY 1 - 2	17	9	26
GP	12	10	22
CT1-3	47	7	54
ST4-6	49	8	57
		TOTAL	159

3.0 Exception reports (01.04.2018 – 31.03.2019)

There were 110 reports in total in this 12 month period. 103 reports related to hours and rest and 7 related to education opportunities missed. No fines are due.

Exception reports by Directorate				
Directorate	No. exceptions carried over	No. exceptions raised	No. exceptions closed	No. exceptions outstanding
City and Hackney	0	20	17	3
Tower Hamlets	0	60	58	2
Luton	0	0	0	0
Bedfordshire	0	0	0	0
Newham	0	6	5	1
CAMHS	0	24	23	1
Total	0	110	103	7

3.1 The majority of reports have been in Tower Hamlets. There is heavy workload in specific posts including Royal London liaison, and some CMHTs, and also while on call. These issues have been addressed directly with supervisors and clinical directors. It is also possible that trainees in this locality are more engaged in reporting – their representatives have regularly attended junior doctor forums, and consultants have been actively engaged in addressing issues. Exception reporting is viewed as a sign of a healthy culture of transparency. CAMHS trainees have also submitted a high number of reports and have been encouraged to report on issues with their non resident on call rota with a view to analyzing if this should be a resident on call rota.

Exception reports by Grade				
Directorate	No. exceptions carried over	No. exceptions raised	No. exceptions closed	No. exceptions outstanding
FY2	0	4	4	0
CT1-3	0	33	27	6
ST4-6	0	73	72	1
Total	0	110	103	7

3.2 There are higher numbers of reports from ST4-6 doctors. This may be the result of a greater confidence in speaking up about workload concerns at higher grades. It may also be the case that core trainees receive closer supervision of their timetable. Core trainees are being actively encouraged to report on issues.

Exception reports by Action				
Directorate	Payment	TOIL	Not agreed	N/A as no action required
City and Hackney	5	7	3	4
Tower Hamlets	30	20	2	6
Newham	0	4	1	1
Luton + Beds	0	0	0	0
CAMHS	0	24	1	1
Total	35	53	7	12

3.3 Request for payment rather than TOIL typically comes in posts that are busy, in which time off becomes more difficult. These issues have been addressed directly with supervisors in order to find ways to manage the workload.

Exception reports (response time)				
	Addressed within 48 hours	Addressed within 7 days	Addressed in longer than 7 days	Still open
FY2	0	0	0	0
CT1-3	4	2	22	6
ST4-6	15	6	54	1
Total	19	8	76	7

3.4 The majority of reports are taking more than 7 days to address. Trainees are being reminded to raise reports with supervisors at the earliest opportunity. Many supervisors are still unfamiliar with the electronic reporting system which delays the sign off. The Guardian has actively addressed this at consultants meetings and with individual supervisors.

4.0 Locum bookings

4.1 Locum bookings are made to cover vacant shifts on call rotas. Reflecting high level of vacancies the highest number of locum bookings has been in Newham, City and Hackney and in Bedfordshire where there are unfilled posts and trainees working less than full time. The majority of bookings are internal or via bank. Agency bookings are limited to last minute bookings.

5.0 Work schedule reviews

5.1 No formal Work Schedule Reviews were carried out in the reporting period.

6.0 Fines

6.1 No fines have been levied

7.0 Qualitative information

7.1 The 2016 junior doctor contract from NHS Employers includes safeguards relating to working hours. Work schedules and on call rotas are designed to comply with the contract. It's the responsibility of trainees to report breaches in work schedules by exception reporting. Work schedule reviews can take place if there is a need. In particular circumstances, if there are immediate risks to patient safety due to working hours rules being seriously breached, fines can be levied. The role of Guardian of safe working hours is to ensure compliance with the safeguards, act on issues as they arise, and assure the Trust Board that working hours are safe. Guardian of safe working hours reports to Trust Board on the amount of vacant posts and vacant shifts on rotas. This ensures that the impact of rota gaps on safe working practices is monitored. Exception reporting is considered a sign of a healthy training environment. Reports have increased during the past year, although there is room for further improvement.

7.2 The Trust runs a Junior Doctor Forum on a bi-monthly basis chaired by the Guardian and including BMA, medical staffing and medical education representation. The purpose of the forum is broadly to look at any and all issues pertinent to creating a more supportive working environment for junior doctors and includes as agenda items reports from each locality, information on rest facilities, timely access to rotas, and impact of rota gaps. The forum has been well attended by higher trainees, and less well attended by core trainees and by CAMHS trainees. All meetings have gone ahead as planned and the forum has been positively received. A separate meeting with CAMHS trainees has been scheduled for May 2019. Core trainee engagement is being separately addressed and is likely to be the result of having less autonomy over diaries. All trainees have access to channels to report on patient safety issues and local concerns directly in addition to this forum.

7.3 Between 01 April 2018 and 31 March 2019 (2018/19) 110 exception reports were raised. 7 relate to missing mandatory teaching. 103 relate to working over rostered hours. It is very likely that this is an under-representation of the actual breaches. GMC trainee survey 2018 found 48% of psychiatric trainees reported working over their rostered hours at least monthly. If this was reflected in exception reporting it would produce a figure 9 times greater than our current figure. Core trainees, GP trainees and Foundation doctors are reporting significantly less than higher trainees which *may* reflect a perception of negative consequences to exception reporting at earlier stages of their career. It could also be the result of a higher level of support from supervisors. This is important because working over rostered hours leads to exhaustion, low morale, burnout, patient safety breaches, and impacts on retention and recruitment.

7.4 Common themes of exception reports include high demand on services, understaffing / staff absences (including absence of senior colleagues) impacting on workload and training, persistent issues with cross cover, and poor planning of leave and timetables. CAMHS trainees have a non-resident on call and have particular issues related to this.

8.0 Issues arising

8.1 GMC training survey 2018 indicates that trainees across the board are very likely to be under-reporting on exceptions to their rostered hours, and on missed breaks, and missed training opportunities.

8.2 On call rotas have been delayed in some areas, impacting on trainee work life balance and experience of training.

8.3 Many reports describe a very heavy workload in post and staff absences leading to having to stay late to complete work. Unfilled posts are at 11% as of March 2019. As described above, the highest number of vacancies has been in Newham directorate higher training.

8.4 Core trainees are reporting less than higher trainees

8.5 Child and Adolescent Mental Health higher trainee rota is non-resident on call, and has particular rules to ensure compliance. Trainees cover 4 sites while on call including other Trusts – Great Ormond Street, Whittington and NELFT. Trainees have audited total activity while non-resident against agreed limits, and have requested a more consistent approach to reporting across the trusts, and oversight of the rota by ELFT.

9.0 Actions taken to resolve issues

9.1 On under-reporting: consultants have been asked to be more proactive and receptive to addressing workload with trainees as part of their weekly supervision, and in reviewing work schedules as required.

9.2 On timely access to on call rotas: The Chief Medical Officer has agreed additional support for medical staffing and medical education departments in the production of on call rotas.

9.3 On barriers to choosing particular localities: Research is underway lead by juniors to identify barriers to choosing particular posts and localities, and is due to be reported on shortly.

9.4 Core trainees: an engagement meeting held with medical education team on 2 May 2019 indicated that there is room for improvement in reporting by core trainees and some feel unsupported by consultants in exception reporting. This will be addressed directly with clinical supervisors.

9.5 ON CAMHS rota: Human Resources of ELFT, Great Ormond Street Hospital, Whittington, and NELFT met CAMHS training programme directors, Guardians of Safe Working, and CAMHS trainee representatives met on 1 May 2019 to consider any action necessary on CAMHS on call rota. Conclusion of the meeting is that no breaches are occurring in rota rules, and the rota is compliant.

10.0 Ongoing Risks

10.1 The Board is asked to note the ongoing risks to the organization identified in this report which the Guardian of Safe Working Hours, Medical Workforce Manager, Director of Medical Education and Clinical Directors will keep under regular review and remediate wherever possible:

- Ongoing rota gaps as a result of difficulties in fully recruiting.
- The Board is asked to note that most of the ongoing staffing issues within ELFT are related to factors outside the control of the Trust, namely the ongoing difficulties with recruitment into psychiatry and the consequent difficulties faced by Health Education England in placing trainees in all available training posts within the Trust.

11.0 Action Being Requested

11.1 The Board is asked **RECEIVE** and **NOTE** potential areas of concern and the plans in place to quantify risk and identify plans for remediation where necessary.