St George's University Hospitals

St George's Junior Doctors Forum

Tuesday 18th April 2017 12:30-14.00

Lecture Theatre B, SGH

Present	Emma Barrett (EB)	Medical Staffing
	Claire Low (CL)	Medical Staffing
	Robert Bramwell (RB)	PGME
	Ami Stokes AS)	BMA
	Henry Fok (HF)	SpR - Clinical Pharmacology
	Judy Roberts (JR)	Associate Dean, St George's Primary Care
	Rebecca Torry (RT)	HESL GP Training Lead
	Afof Bougueron (AB)	ST6 Paeds
	Genevieve Shouls (GS)	CMT Cardiology
	Dagan Lonsdale (DL)	SpR, Clinical Pharmacology
	Sunil Dasan (SD)	Guardian of Safe Working
Apologies	Rob Seal	

1) Welcome, Apologies and Introduction by DL

2) Minutes of Previous meeting:

• No matters arising from previous minutes

3) <u>Report from the Guardian of Safe Working (SD)</u>

- 145 Exception reports
- 35 compensation and work schedule review
- 1 TOIL
- 13 Overtime payments
- 41 with no clear outcome
- Exceptional Reporting have tailed off dramatically since March with no clear reason
- **SD** has been to F1 teaching again to remind them of the significance of Exceptional Reporting
- No E.R. from Paediatrics and Surgery for March and April
- Few issues in terms of changeover
- Rotas not received until day before changeover

- **CL** highlighted the importance of getting rotas out in advance. Jonathan Round (DME) will help to escalate by discussing with departments. It was suggested that F1 rotas could be issued a year in advance.
- Divisions should start populating the work schedules with training opportunities
- Newsletter specifically focus to GP trainees with work schedule guidance
- Points from teaching HALT campaign. This focused on the importance of trainees taking their breaks. The message will also be highlighted at the Doctors Induction

Medical Board update:

- Any exception reports with no clear outcome and 30 days overdue will be paid additional up to 31st March 2017 as compensation overtime payment.
- Compensation work schedule review also up to 31st March 2017.
- Details of this update will be passed on to DDOs. **SD** will follow up with an email and also include in the next Guardian Newsletter

4) Medical Staffing Update – CL

- **CL** introduced RB to the group as will be joining the MS team to work alongside **SD** and **EB**
- GP resources still with HESL. **CL** to chase HESL this week.
- Exception Reporting Policy to go to LNC this week so hope to share and get comments prior to submission.

5) GP Update

- GP trainees should review their work schedule the first week in Practice. All concerns should be directed to the trainers
- **RS** highlighted concerns over E.R. and anxiety surrounding new templates. GP Schools and Associate Deans would like to know more about these concerns.
- ITP posts these will be an issue and will require Programme Directors input/joint contribution.
- Rotas the aim is to get these out within the 8 week time frame
- **SD** Work Schedules should reflect what is actually being worked. Educational Supervisors need to review work schedules, E.Rs. and procedures. Any amendments to Work Schedules must be sent back to Medical Staffing for updating.
- Exceptional Reporting policywill apply to GP LEO as well

6) <u>St George's Trainees</u>

- Flexibility of Work Schedules Work Schedules should be reviewed and personalised to identify any lapse in training opportunities i.e. trainees with Occupational Health needs, trainees in difficulty, less than full time trainees and trainees with caring responsibilities outside of work. If a work schedule needs tweaking, the Educational Supervisor should agree and liaise with managers to amend schedules.
- **DL** encouraged trainees to Exceptional Report as this will highlight any major concerns and bring results. It's also a means of getting rotas amended. Four rotas have been changed since October as a result of E.R. The Trust is very clear that they are in support of E.R.
- **AB** from Paeds flagged up an issue with handover times on the Paeds rota. Handover needs to be longer.

<u>Action</u>: Meeting needs to be set up with the Paeds department/doctors to discuss the handover concerns. Medical Staffing needs to be invited.

- A&E twilight shift (1500-2300) frequent offender reliant on night team to come down to A&E as handover exceeds 30 minutes. Management needs to be more organised.
- A&E admitting that SpRs not aware of prescribing on iClip.
- **DL** his tenure as chair may be coming to an end soon so seeking volunteers to take over. There are x2 LTFT trainees in line to take over but a hospital trainee is also needed

7) AOB

Rota Gaps – Rota gaps to be investigated. CL stated that Procurement is currently drafting tender documents.

- Medicine is understaffed due to rota gaps. Doctors are working over and above to fill these gaps this unsafe. Trust is refusing to pay for locums to fill gaps
- GPs are allowed to defer training for a year. Approximately, 10-20% of GPs defer which can result in gaps.

LNC – The LNC is set for 19th April 2017

Fine Money (£138) – SD is yet to decide how funds received through fines will be used.

Action: Judy Roberts and Rebecca Torry to be added to mailing list

Next Meeting – 18th May, 2nd Floor Grosvenor Wing (Room G2.9) at 12:45