

<b>Meeting Title:</b>	Trust Board
<b>Date:</b>	28 May 2020
<b>Report Title:</b>	Guardian of Safe Working Hours (GOSWH) Report – for the period 09/11/2019 – 27/03/2020
<b>Lead Director/ Manager:</b>	Dr Richard Jennings
<b>Report Author:</b>	Dr Serena Haywood, Guardian of Safe Working Hours
<b>Presented for:</b>	Approval    Decision    Ratification <b>Assurance</b> Discussion    Update Steer    Review    Other
<b>Executive Summary:</b>	<p>The Covid-19 pandemic has affected all work of junior doctors in the Trust in an evolving picture. This involves rotas, redeployment, training, exception reporting and wellbeing.</p> <p>The data for training posts includes general practitioners (GPs) in training, but does not include trust doctors or clinical fellows. Trust doctors and clinical fellows work alongside doctors in training on the junior doctor rota, but are not employed on the Doctor in Training contract.</p> <p>Rota gaps data for the period covered by this report is not available due to Covid-19. All rotas were remodelled to a 'mega-rota'. This is returning to previous rotas from June.</p> <p>The mess has been updated with soft furnishings and rest areas during covid and other rest areas have been furnished in the Anaesthetic Department with plans for a rest area in the Emergency Department using the Department of Health, Wellbeing fund of £60,000.</p> <p>There were 98 exception reports with all but 6 related to working hours. Most are reported in medicine particularly respiratory, reflecting pressures due to Covid-19.</p> <p>No fines were issued this quarter. The total fine monies stand at £9605.89</p> <p>One Immediate Safety Concern was raised in acute medicine and a plan made towards a resolution.</p> <p>The Director of Medical Education (DME) post vacancy has been filled since 01 April 2020 and regular meetings between the DME and the GOSWH are planned post covid.</p> <p>The Junior Doctors forum met monthly until covid and was well attended. Into the covid period, the meetings were change to webinars with live Q and A's and were well received.</p> <p>The trainees should be commended for their commitment to patient safety during these extraordinary times sometimes at the expense of their own wellbeing. The traumatic effect of these months will continue to be monitored by the Trust Wellbeing teams and facilitated by the GOSWH.</p>

<b>Recommendation :</b>	The Trust Board is asked to receive and note the Guardian of Safe Working Hour's report.
<b>Supports</b>	
<b>Trust Strategic Objective:</b>	Ensure the Trust has an unwavering focus on all measures of quality and safety, and patient experience.
<b>CQC Theme:</b>	Well led  Safe
<b>Single Oversight Framework Theme:</b>	Quality of Care
<b>Implications</b>	
<b>Risk:</b>	<ul style="list-style-type: none"> <li>• Failure to ensure that doctors are safely rostered, and enabled to work hours that are safe, risks patient safety and the safety of the doctor.</li> <li>• Failure to ensure that doctors are safely rostered, and enabled to work hours that are safe, risks overtime payments and fines being levied.</li> </ul>
<b>Legal/Regulatory:</b>	Compliance with the <i>Terms and Conditions of Service for NHS Doctors and Dentists in Training (England) (2016)</i>
<b>Resources:</b>	<ul style="list-style-type: none"> <li>• Funding for overtime payments, fines and service charges arising from work schedule reviews</li> <li>• Additional Programmed Activities (PA) allocation in consultant job plans for time taken to personalise work schedules, resolve exception reports and perform work schedule reviews</li> <li>• Administrative support for the role of Guardian</li> </ul>
<b>Equality and Diversity:</b>	N/A
<b>Previously Considered by:</b>	N/A  This report would usually have been considered by the Workforce and Education Committee, but the May 2020 WEC meeting was cancelled due to the Covid-19 pandemic.
<b>Appendices:</b>	None

## Guardian of Safe Working Hours (GOSWH) Report

### Quarter 4 2019/20

#### 1.0 PURPOSE AND BACKGROUND

This paper provides assurance to the Board on the progress being made to ensure that junior (trainee) doctors' working hours are safe, and to highlight all fines and work schedule reviews relating to safe working hours. This report also includes information on all rota gaps on all shifts.

Further details are available in previous reports.

#### 2.0 COVID-19 PLANNING AND MANAGEMENT

a) Rota – The 'mega-rota' which facilitated staffing into the acute medical areas will be in place until the covid patient admissions drop significantly which has already been noted in the beginning of June when trainees are in many instances returning to their normal rotas. They will be supported with any pay, rota and leave questions by the GOSWH and the General Manager. The mega rota was agreed with the Trust's Workstream Group, the GOSWH and the chair of the Local Negotiating Committee (LNC) to ensure that the rotas fall within the *Working Time Directive* wherever possible. Trainees were asked to consider volunteering for the Covid-19 acute hospital, NHS Nightingale, but, as of May 2020, NHS Nightingale has been suspended and this is no longer a factor. .

b) Redeployment - The guidance from Health Education England, NHS England and the General Medical Council (GMC) was that doctors should be supported in training for any new roles or for returning to roles. Doctors in training volunteered early to deploy into acute areas and have now been formally redeployed by education leads of the Trust via the Workstream Group. The trainees are now returning in many cases to the rotas they previously were on.

c) Wellbeing – was supported comprehensively throughout covid with Trust-wide rest and support facilities. The Trust repurposed four rooms for staff wellbeing during the Covid-19 pandemic and individual wellbeing support in terms of food and a supportive discussion continues to be offered by the Medical Examiners team as doctors come to discuss deaths. Support via Trust Wellbeing has included specific session for doctors in training. .

d) Teaching - The Director of Medical Education (DME) has advised trainees that educational opportunities should now be taken up as much as possible post covid. Training deadlines have been allowed to be extended for a year.

e) Personal Protective Equipment (PPE) - PPE remains available throughout the Trust and the trainees are encouraged to report any shortages.

f) Junior Doctors' Forum (JDF) - The GOSWH continues to hold weekly or fortnightly webinars with the DME, Chief Medical Officer (CMO) (if available), the LNC Chair, heads of virology, workstream leaders and other guest speakers. The trainees use a messaging service and can be contacted for changes to rotas and any other essential information and wellbeing.

### 3.0 ANALYSIS OF REPORTS AND FINES

#### 3.1. Fines

There were no fines issued this quarter. The total fine monies stand at £9605.89

#### 3.2. Exception Reports

A total of 98 exception reports were submitted the majority in relation to working hours/conditions in this quarter, with six due to missed training or education opportunities. Missed breaks were not separately reported, but were often mentioned in working time breaches. Most exceptions were in medicine, which is consistent with previous experience during the months of winter pressures.

In the fourth quarter of 2018/19, there were 87 exception reports; reporting has therefore increased compared with a year ago. All but four exception reports were eligible for review.

St George's is the Lead Employer of GP trainees across South London. One exception episode was reported by GP trainees.

The GOSWH will close incomplete exception reports on the Allocate software with a note to the trainee to ensure that they claim any outstanding overtime payment if they have been unable to take Time-off in Lieu (TOIL) within a month.

The 2019 update to the Doctor in Training contract asks that TOIL is completed within 48 hours. This is an on-going problem for trainees as there is limited time to take TOIL. They are therefore paid overtime.

#### 3.3 Exception Report Breakdown

Division	Number of exceptions	Breakdown
Medicine and Cardiovascular	63	41 Acute Medicine including AMU
		0 Gastroenterology
		2 Nephrology
		6 Endocrinology
		0 Neurology
		13 Respiratory
		0 Cardiology
		0 ED
		1 Haematology
		0 Care of the elderly

<b>Children's, Women's, Diagnostics and Therapeutics</b>	<b>9</b>	<b>0 Obstetrics and gynaecology</b>
		<b>9 Paediatrics</b>
		<b>0 Neonatal medicine</b>
		<b>0 Paediatric surgery</b>
<b>Surgery, Theatres, Neurosciences and Cancer</b>	<b>25</b>	<b>18 General surgery</b>
		<b>0 Vascular surgery</b>
		<b>0 Plastic Surgery</b>
		<b>2 Urology</b>
		<b>5 ENT</b>
		<b>0 Renal transplantation</b>
		<b>0 Neurosurgery</b>
		<b>0 Trauma and orthopaedics</b>
		<b>0 Cardiothoracic surgery</b>
<b>Community</b>	<b>0</b>	<b>QMH rehab</b>
		<b>Psychiatry</b>
		<b>The Priory</b>

### 3.4 Immediate Safety Concern (concerns raised by trainee)

No Work Schedule Reviews were carried out, as this one report related to staffing and not a specific rota issue.

### 3.5 Rota gaps

This information is not currently available, nor currently relevant due to the reconfiguration of the workforce in response to Covid-19.

## 4.0 IMPLICATIONS

### 4.1 Risks

The return to the original rotas will be monitored by the GOSWH to ensure work schedules are compliant, any owed pay is forthcoming and encourage trainees to take owed annual leave.

### 4.2 Legal Regulatory

The GOSWH follows the Terms and Conditions of Service for NHS Doctors and Dentists in Training (England) 2016 (update 2019)

### 4.3 Resources -cost pressures from fines

Funding overtime payments to doctors in training represents an ongoing cost pressure.

## 5.0 NEXT STEPS

### 5.1 Supporting trainees to exception report

The Guardian will be helping consultants to help trainees to make exception reports.

## 6.0 RECOMMENDATIONS

The Board is asked to note this report and take note of the various risks to safe working hours and trainee wellbeing in relation to the Covid-19 pandemic. The Trust has been flexible and supportive of trainees. The GOSWH remains available for strategic advice to the board and reflecting the concerns of the trainees who are on the frontline of acute work and are instrumental in the health and wellbeing of the patients of St George's University Hospitals. The GOSWH has been overwhelmed by the humbleness and generosity of the trainees in this period at not insignificant personal risk and loss. They have always put the patients and their families first and have witnessed sometime extraordinarily distressing events. The long term psychological effects are likely to be not insignificant and the Trust's support of the trainees is highly relevant.