

**UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST**  
**BOARD OF DIRECTORS**  
**THURSDAY 30 MARCH 2017**

<b>Title:</b>	<b>QUARTERLY BOARD REPORT FROM TRUST GUARDIAN OF JUNIOR DOCTORS SAFE WORKING Q1 2017</b>	
<b>Responsible Director:</b>	Tim Jones, Executive Director of Delivery	
<b>Contact:</b>	Ext 14337	
<b>Purpose:</b>	Quarterly Board Report from Trust Guardian of Safe Working (GSW)	
<b>Confidentiality Level &amp; Reason:</b>	N/A	
<b>Annual Plan Ref: 9.3</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 to the Trust Board together with an aggregated annual report.</li> <li>• This report represents the inaugural report following the phased implementation of the New Junior Doctor Contract from December 2016.</li> <li>• Provides a quarterly analysis of exception reports submitted by junior doctors (December 2016- February 2017).</li> </ul>	
<b>Recommendations:</b>	<p>The Board is asked to:</p> <p><b>ACCEPT</b> the contents of the Report.  <b>AGREE</b> to the incorporation of the quarterly reporting requirement into the Safer Staffing section of the Performance Indicators report.</p>	
<b>Approved by:</b>	Tim Jones	Date: 22/03/17

# **UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST**

## **BOARD OF DIRECTORS THURSDAY 30 MARCH 2017**

### **QUARTERLY BOARD REPORT FROM TRUST GUARDIAN OF JUNIOR DOCTORS SAFE WORKING Q1 2017**

#### **PRESENTED BY EXECUTIVE DIRECTOR OF DELIVERY**

#### **1. Introduction**

This paper sets out the background and context to the appointment of the UHB Guardian of Safe Working (GSW) and implementation of that role within the Trust.

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 and the GSW shall provide assurance to the Trust Board in this regard.

The role is required to sit independently from the management structure, with a primary aim to represent and resolve issues related to working hours for Junior Doctors in Training. The work of the GSW will be subject to external scrutiny by NHS Improvement (NHSI) and Health Education England (HEE).

Dr Jason Goh was appointed as Trust GSW and commenced in post in October 2016. The post works closely with the Junior Doctors Monitoring Office who are responsible for preparing new contract compliant work patterns and provide the administrative support for the exception reporting process

#### **2. The Role of the Guardian of Safe Working**

The role of the GSW is to:

- Champion safe working hours for doctors in approved training programmes.
- Review all exception reports in respect of safe working hours. This will allow the GSW to record and monitor compliance with the terms and conditions of service
- Escalate issues in relation to working hours to the Executive Director of Delivery for decision and action where these have not been addressed at departmental level.
- Require work schedule reviews to be undertaken where necessary.
- Have the authority to intervene in any instance where the GSW considers the safety of patients and/or doctors is compromised.

- Provide assurance that Junior Doctors in Training are safely rostered and enabled to work hours that are safe and compliant with Schedules as set out in their terms and conditions of service.
- Distribute monies received as a result of financial penalties to be used for improving the training and service experiences. of doctors

The GSW is required to provide the Board with a quarterly report which will include:

- Aggregated data on exception reports
- Details of fines levied against departments with safety issues.
- Data on rota gaps / staff vacancies/locum usage
- A qualitative narrative highlighting areas of good practice and/ or persistent concern.

### **3. Exception Reporting**

- 3.1 Exception reports can be raised where the junior feels the following is non-compliant with their contract of employment requirements:
- Safe Working (hours/breaks)
  - Educational opportunities
  - Work patterns
  - Support during service commitments

In line with contractual requirements, the Trust has purchased the exception reporting module of the Allocate Healthmedics software for managing the exception reporting process. Junior doctors and their associated clinical and educational supervisors are set up on the software as they migrate to the new contract. Each user is required to register and log-in to raise an exception report and/or manage it. The current software provides a basic function but is expected to evolve in its functionality.

- 3.2 The GSW working with key Trust leads has established a procedure for Work Schedule Reviews and Exception Reporting for Doctors and Dentists in Training in line with national guidance. Each Exception Report is automatically forwarded to the specialty consultant lead, the administrator and the GSW for action. The Trust procedure for safe working (hours) exception reporting requires a junior doctor to reasonably obtain authorisation from the relevant consultant on duty to work outside their template scheduled start/finish time
- 3.3 The Trust has established a Guardian Exception Reporting Review Group (GERRG) with a mandate to represent trust Junior Doctors in Training and scrutinise the work of the Guardian, review the quarterly ER report and ensure that income from fines is disbursed appropriately. The inaugural meeting was held on 28<sup>th</sup> February 2017 where the Terms of Reference and the core group membership were agreed.
- 3.4 There is a nationally recommended phased New Contract implementation plan across all trainees from December 2016 to October 2017 and UHB is

broadly following this plan.

The total number of junior doctors who have transferred to the new contract (up to 28/2/17) is 207; the total number of new contract rotas in place at 28/2/17 is 32. The remaining rotas will transfer to new contract between March and October 2017 with the majority in place by the end of August 2017.

#### 4. Exception Reports (ERs) submitted during quarter one (December 2016 - February 2017)

<b>Total submitted</b>	<b>25</b>	
Error ERs	4	
Actual ERs	21	Hours (19) Educational (2)
Outcome: TOIL	8	
Outcome: payment	3	
Outcome: Pending	5	
Outcome: No further action	4	

#### 4.2 Fines Levied

There were no fines levied during this period.

#### 4.3 Patient Safety Issues:

No patient safety issues were identified during this period.

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

#### 5.1 Engagement of Junior Doctors:

Implementation of the New Contract has been underpinned by a series of multiple briefing sessions for the relevant junior doctors, consultant supervisors, specialties, Clinical Service Leads, operational managers.

There is a continued need to educate the doctors around exception reporting both in terms of the process but also what constitutes an exception. The GSW will continue to hold briefing sessions, attend existing junior doctor's fora, specialty and departmental meetings to clarify the exception reporting procedure, and address concerns.

Through the GERRG, the GSW will also work with junior doctor BMA and LNC consultant representatives to fine tune the process. Junior doctors have voiced concerns over the Trust incorporation of the authorisation to work over procedure - mainly with regards to the logistics of obtaining this. The GSW

has taken these concerns on board and will monitor the process.

5.2 Engagement of Employer (Board, Divisional Managers, Consultants):

The GSW will continue to engage with the relevant stakeholders in the Trust to improve the process. Challenges include consultant engagement, timeliness in dealing with exception reports, reimbursing overtime and TOIL.

5.3 Administrative Support:

A requirement for additional administrative support has been identified due to the onerous nature of operationalising the process of exception reporting as more rotas are rolled out. To ensure that the Trust is able to fulfil its contractual obligations within appropriate deadlines, there is an immediate need for approval of administrative support for the GSW and exception reporting process, as outlined in the Junior Doctors in Training CEAG paper.

5.4 Quarterly Reporting to the Board of Directors

It is proposed that the quarterly reporting to the Board of Directors is incorporated into the Safer Staffing section of the Performance Indicators report.

**6. Recommendations**

The Board is asked to:

**ACCEPT** the contents of the Report.

**AGREE** to the incorporation of the quarterly reporting requirement into the Safer Staffing section of the Performance Indicators report.

Tim Jones  
Executive Director of Delivery