

**AGENDA ITEM – GUARDIAN OF SAFE WORKING
BOARD OF DIRECTORS July 23**

Report title	Guardian of Safe Working Report
Report from	Louisa Wickham, medical director
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Attachments	N/A
Link to strategic objectives	We will attract, retain and develop great people

Brief summary of report

The guardian of safe working report summarises progress in providing assurance that doctors are safely rostered, and their working hours are compliant with the 2016 terms and conditions of service (TCS) for doctors in training. This report covers the period from 13/03 /2023 – 17/07/2023.

Exception Reports:

During this period, there have only been **4 Exception Reports** by 1 ST3 and 2 ST6.

There were 2 educational exception reports for missed theatre opportunities during cataract drive at St Anne’s where theatres were cancelled for 2 weeks and converted to clinics. This resulted in significant loss of training opportunities especially for academic STs with less frequent theatre lists.

Another exception report was for 2 hours overtime in cataract clinic during this cataract drive week.

Cataract drive week was discussed at the Junior Doctor Forum where trainees expressed concern that replacement surgery lists were not given whilst Fellow-run cataract lists were still occurring on weekends. I have since got reassurance from the clinical directors of the cataract service that this cataract drive was a one-off and will not happen again.

One other exception report was for missed breaks during an on-call at City Road where staff shortages (due to unfilled evening locum shifts) led to a knock-on effect on the night-time shift increasing workload. Although the doctor involved did not work beyond contracted hours, it was felt that the workload was intense with little time for breaks. The trainee has been reminded that there are systems in place to call seniors for help should workloads be unmanageable. I have also been given reassurance by trainees that despite the rota gaps in A&E, there have not been instances of trainees being pulled out of their regular rotation to do more than their regular 2 A&E sessions weekly.

I am pleased to report that during this period, there have been no reported instances of breach of the minimum 8 hours rest requirement between shifts; no instances of a breach of the 48-hour average working week (across the reference period agreed); no instances of a breach of the maximum 72-hour limit in any seven days. Consequently, no financial penalties have been levied during this period.

High level data

Number of doctors in training (total):	58
Amount of time available in job plan for guardian to do the role:	1 PA/week
Admin support provided to the guardian (if any):	Ad Hoc provided by HR

Amount of job-planned time for educational supervisors:	1 PA per week						
<p>Actions/Discussions taking place:</p> <ul style="list-style-type: none"> • Exception reporting is low, and this reflects trainees' wellbeing and satisfaction in working conditions. • In future, any service management decisions that can affect training to be made jointly with clinical service directors. • Consider ways to incentivise trainees to fill locum vacancies and ensure safe staffing. <p>Summary</p> <p>All Moorfields trainees are safely rostered in compliant rota patterns with no breaches of the terms and conditions of service occurring during this reporting period. Most trainees are familiar with the process of exception reporting and there are systems in place to ensure prompt compensation payment for excessive hours worked. Trainee morale is high and working conditions good with all exception reports resolved.</p>							
<p>Quality implications</p> <p>There are clear implications for patient care if the trust does not make sure it is adhering to the new contract and stricter safer working limits, reduction in the maximum number of sequential shifts and maximum hours that a junior doctor is able to work.</p>							
<p>Financial implications</p> <p>The guardian of safe working may impose fines if specific breaches of the terms of conditions of service occur where doctor safe working has been compromised.</p>							
<p>Risk implications</p> <p>The risk implications are detailed in the report in terms of reasons for exception reporting and potential impacts on the quality of care provided to patients if there are breaches in the contract.</p>							
<p>Action required</p> <p>The board is asked to consider the report for assurance.</p>							
For Assurance	✓	For decision		For discussion		To note	✓