

Agenda Item 2.iv

Report to:	Board of Directors	Date: 7 September 2023
Report from:	Dr Ian Smith, Medical Director	
Principal Objective/ Strategy and Title	Organisational Culture Guardian of Safe Working Report April 2022	
Board Assurance Framework Entries	Unable to provide safe, high-quality care	
Regulatory Requirement	2016 Medical Terms and Conditions of Service for Doctors and Dentists in Training (Version 9 April 2021)	
Equality Considerations	None believed to apply	
Key Risks	Failure to maintain or develop the Trust's Safety Culture	
For:	Information	

This report is from the Medical Director as the Guardian of Safe Working (GoSW) position is temporarily vacant. A call for applicants has gone out to the consultant body and an interview date has been set for 21st August 2023. We are grateful to Karen Panesar (KP) and Dr Nicola Jones (NJ) for providing support for the junior doctors (JD's) during this hiatus.

1. Exception reporting

There were 9 exception reports in quarter 2 compared to 12 in quarter 1. All were related to hours of working and 2 of these posed an immediate patient safety issue related to an overbooked clinic with insufficient medical cover. Two reports were resolved through time off in lieu and 2 through overtime payments. The others are yet to be resolved.

Exception Reports (ER) over past quarter	
Reference period of report	01/04/23 - 30/06/23
Total number of exception reports received	9
Number relating to immediate patient safety issues	2
Number relating to hours of working	9
Number relating to pattern of work	0
Number relating to educational opportunities	0
Number relating to service support available to the doctor	0

In the last report from the GoSW (1/12/22) a concern was raised that perhaps the JD's were 'afraid' to raise exception reports which explained the low level of reports. This was to be discussed with NJ as the new Director of Medical Education and escalated if the concern was validated. No such escalation has occurred, but we will continue to be curious about the reasons for low levels of exception reporting.

2. Engagement

The JD's forum has continued to function with reasonable engagement, the last meeting was 26th July 2023. KP has attended. An issue was previously raised about the provision of funding for lunch to demonstrate the Trust valuing attendance. The funds have been identified in the MD's training budget. The main points of discussion at the most recent meeting were the fitting out of the JD's Mess and payments during periods of industrial action. There was positive engagement with proposals for improvement communication of staff attending the site during IA to ensure that appropriate payments can be made.

3. Junior Doctor's Mess

There has been considerable unhappiness due to the lack of a JD's Mess in the hospital, an issue for the last 4 years since the new hospital opened. A large room, which can be divided for different functions, has been provided on the fifth floor and is now in use. There is more to do as fire regulations mean that it is not possible for example to have a refrigerator in the room. While the JD's Mess on the fifth floor have been welcomed, concerns have been expressed as to whether those working in theatre and critical care areas (totaling over 30% of the JD workforce) will not be able to make use of this facility as it is too remote. For example, in the event of an emergency the bedside nursing team pull a buzzer that can only be heard within CCA. Whilst we would expect doctors to stagger breaks such that there is always someone present on the unit such emergencies are usually best managed as a team, and that bleeping people who then need to make their way to CCA in the lift could lead to delays in delivery of emergency care. Thus, a space needs to be identified within CCA that could fulfil the purpose of a mess for this group of JD's. NJ is looking into potential solutions.

4. Equity of access to training and development opportunities

It has been highlighted that Locally Employed Doctors (LED's), many of whom are international medical graduates, have reduced access to educational supervision and resources to support training and development (e.g. lower study leave budget) in comparison to Deanery trainees despite having the same clinical responsibilities. NHS England requires the trust to review the equality of opportunity between groups of people with protected characteristics, and to promote and maintain such equality. In response to this challenge a new clinical lead for LED's is being recruited with the remit of exploring solutions.

5. Recommendation

The Board of Directors is requested to note the content of this report.