The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

REPORT TO THE TRUST BOARD (PUBLIC)

RESPONSIBLE DIRECTOR:	REPORT FOR:		IMPACT ON BUSINESS:		
	Decision		High	Med	Low
Dr Nick Lyons Medical Director	Discussion				
	Information	✓			
LEAD MANAGER:	**REPORT TYPE:**		**BAF REFERENCES & RAG:**		
	Strategic				
Dr Zaheer Babar Guardian of Safe Working	Operational	✓			
	Governance		**RELATED WORK: (PREVIOUS PAPERS TO COMMITTEE)**		
PEER ASSIST:	**PEER REVIEW:**				
CQC Domain: (safe, caring, effective, responsive, well-led)					

Meeting Date: **27 November 2018**

Report Title: **Quarterly Report on Safe Working Hours: Doctors and Dentists in Training Q2 2018-19 July-September**

PURPOSE:

The purpose of this report is to provide an update to the board on the impact of the 2016 junior doctor contract. Its key aim is to provide assurance of the mechanisms in place for safe working practices and compliance with the 2016 terms and conditions of service.

SUMMARY:

Q2 of 2018-19 has shown an increase in the number of exception reports. During this quarter, total numbers of exception reported were 88. Out of these, 83 were submitted by F1 doctors and 5 by F2 doctors. These exception reports were resolved by overpayments of extra hours worked and giving time in lieu. No action was required in 9 reports.

No exception reports were submitted by CMTs, GPVTS or STs which reflects an apparent lack of willingness to report issues higher trainees.

There has been variable compliance with the resolution timeline stipulated within the T&C of work in Q2. The delay in timely resolution of these reports was due to factors related to clinical supervisors.

No exceptions have been in relation to training issues and 7 were of immediate safety concerns (ISC).

This quarter has also seen an improvement in trainee's engagement in Junior doctor's forum.

FINANCIAL IMPLICATIONS / EFFICIENCY SAVINGS / QUALITY IMPROVEMENT:

Due to delay in resolution of these exceptions, there was a delay in overpayments to the trainees. Therefore, I don't have the data about the cost of these overpayments to the trust. Once these overpayments are made, I will submit a supplementary report.

RISK ASSESSMENT (CROSS-REFERENCE WITH RISK REGISTER WHERE APPROPRIATE):

Strategic / External	Operational/ Organisational	Financial	Clinical	Legal/ Regulatory	Reputational / Patient Experience

RECOMMENDATIONS:

1) I would recommend that the measures should be taken to improve the engagement by the clinical supervisors for the timely resolution of these exceptions.

2) Measures should be employed by each division to provide Guardian the information about overpayments in timely fashion.