



### Report Cover Sheet

Report to:	Board of Directors	
Date of the Meeting:	27 November 2019	
Agenda Item:	P1/211/19	
Title:	Quarterly Report on Safe Working hours: Doctors and Dentists in Training	
Report prepared by:	Dr Madhuchanda Chatterjee, Guardian of Safe Working	
Executive Lead:	Sheena Khanduri, Medical Director	
Status of the Report:	Public	Private
	X	

Paper previously considered by:	WEOD
Date & Decision:	12 November 2019 - Noted

Purpose of the Paper/Key Points for Discussion:	<p>This report outlines the arrangements for doctors in training during quarter 2 (July to September) 2019 including:</p> <ul style="list-style-type: none"> <li>- numbers of doctors in training</li> <li>- exception reports on hours during the period</li> <li>- number of agency shifts used</li> </ul>
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Action Required:	Discuss	
	Approve	
	For Information/Noting	X

Next steps required	Further monitoring of doctors in training at Clatterbridge Cancer Centre will be continued as an on-going process. No questions are raised on this issue currently.
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*The paper links to the following strategic priorities (please tick)*

Deliver <b>outstanding care locally</b>	x	Collaborative system <b>leadership</b> to <b>deliver better</b> patient <b>care</b>	
<b>Retain</b> and <b>develop outstanding staff</b>	x	Be <b>enterprising</b>	
<b>Invest</b> in <b>research &amp; innovation</b> to deliver <b>excellent</b> patient <b>care</b> in the future		Maintain <b>excellent</b> quality, operational and financial <b>performance</b>	x

*The paper relates to the following Board Assurance Framework (BAF) Risks*

BAF Risk	Please Tick
1. If we do not optimise quality outcomes we will not be able to provide outstanding care	
2. If we do not prioritise the costs of the delivering the Transforming Cancer Care Programme we will not be able to maintain our long-term financial strength and make appropriate strategic investments.	
3. If we do not have the right infrastructure (estate, communication & engagement,	

information and technology) we will be unable to deliver care close to home.	
4. If we do not have the right innovative workforce solutions including education and development, we will not have the right skills, in the right place, at the right time to deliver the outstanding care.	
5. If we do not have an organisational culture that promotes positive staff engagement and excellent health and well-being we will not be able to retain and attract the right workforce.	x
6. If we fail to implement and optimise digital technology we will not deliver optimal patient outcomes and operational effectiveness.	
7. If we fail to position the organisation as a credible research partner we will limit patient access to clinical trials and affect our reputation as a specialist centre delivering excellent patient care in the future.	
8. If we do not retain system-side leadership, for example, SRO for Cancer Alliance and influence the National Cancer Policy, we will not have the right influence on the strategic direction to deliver outstanding cancer services for the population of Cheshire & Merseyside.	
9. If we do not support and invest in entrepreneurial ideas and adapt to changes in national priorities and market conditions we will stifle innovative cancer services for the future.	
10. If we do not continually support, lead and prioritise improved quality, operational and financial performance, we will not provide safe, efficient and effective cancer services.	x

### Equality & Diversity Impact Assessment

Are there concerns that the policy/service could have an adverse impact on:	YES	NO
Age		x
Disability		x
Gender		x
Race		x
Sexual Orientation		x
Gender Reassignment		x
Religion/Belief		x
Pregnancy and Maternity		x

If YES to one or more of the above please add further detail and identify if a full impact assessment is required.

**TITLE:** Quarterly Report on Safe Working Hours: Doctors and Dentists in Training

**AUTHOR:** Dr Madhuchanda Chatterjee

**RESPONSIBLE DIRECTOR:** Dr Sheena Khanduri, Medical Director

**FOR:** Information / Discussion

### Executive summary

This report covers the period July 2019 – September 2019.

Since August 2017 The Clatterbridge Cancer Centre has had junior doctors who are working under the 2016 Junior Doctor contract and its associated Terms and Conditions of Service. There are also junior doctors (2002 contract) working alongside them and on the same rotas who are not on this contract. Information is being collected from both sets of doctors on issues of working hours to ensure patient safety and for completeness, but only significant breaches for doctors on the 2016 contract could incur financial penalties.

### Introduction

The 2016 Contract for doctors in training ('Junior Doctors') sets out terms and conditions regarding Working Hours (Schedule 03), Work Scheduling (Schedule 04) and Exception Reporting and Work Schedule Reviews (Schedule 05). These are a system of checks and balances to ensure doctors in training work fixed numbers of hours in a 24 hour period, fixed numbers of consecutive days of work and have designated break times in a work period, to try to ensure they are never so fatigued from work as to be a risk to patient safety, which is of paramount importance. The new contract also has schedules outlining the training opportunities the junior doctors should be receiving to ensure appropriate development of skills and knowledge.

### High level data

Number of doctors / dentists in training (total):	23
Number of doctors / dentists in training on 2016 TCS (total):	15
Amount of time available in job plan for guardian to do the role: per week)	0.5 PA (2 hours
Admin support provided to the guardian (if any):	As required
Amount of job-planned time for educational supervisors: trainee advised	0.25 PA per

### a) Exception reports (with regard to working hours)

There are 2 exception reports for this period:

- |             |       |     |                           |
|-------------|-------|-----|---------------------------|
| 1. 04/07/19 | 63257 | CMT | Hours & Rest (30 minutes) |
| 2. 26/07/19 | 63258 | CMT | Hours & Rest (30 minutes) |

### b) Hours Monitoring

Hours monitoring exercises (for doctors on 2002 TCS only)					
Specialty	Grade	Rostered hours	Banding	Range of hours	Working Time Regulation compliant (Y/N)
Clinical Oncology / Medical Oncology	ST3+	44.25	1b	Avg. 44.08 Max 64.00	Y

Hours pulled from DRS					
Dates applicable	Grade	Rostered hours	On - call Frequency	Range of hours	Working Time Regulation compliant (Y/N)
General Medicine	F2 / GP / CMT	45.50	1 in 10	Avg. 45.43 Max. 61.50	Y

Historical monitoring from September 2016 – no longer role for 2 week monitoring undertaken 6 monthly as exception reporting has been for all doctors in training.

### c) Work schedule reviews

Work schedules for back pay for May 2019 sent on and processed for ST3+, LTFT banding changes also sent on for processing.

Work schedules reviewed for ward based trainees.

### d) Locum bookings

Locum booking (bank) by department					
Specialty	Number of shifts requested	Number of shifts worked	Number of shifts given to agency	Number of hours requested	Number of hours worked
Clinical Oncology / Medical Oncology	8	8	0	111	111
General Medicine	143	143	138	1397.25	1397.25

#### **e) Locum work carried out by trainees**

The above shifts have been filled internally by existing junior trainees or by agency. The cover required is related to sickness, maternity, a vacancy and a Less than Full Time Trainee in the rotation.

#### **f) Vacancies**

There 2 substantive vacancies during this quarter due to trainees gaining CCT. There are now three gaps in the clinical / medical oncology staffing due to trainees being out of programme (OOP) on research which affects service provision by Oncology trainees during daytime work and results in Consultants not having the support of these doctors in their clinics. The on-call out of hours rota however does include three OOPs. We have had final year trainees complete their CCT and gain Consultant roles, one trainee is also on maternity leave.

From July 2019 there has been 7.8 WTE on the rota supported by an additional 2 WTE agency locum doctors and 1 WTE Clinical Fellow. There is 1 gap in the CMT allocation, and a GPST training working 0.8 WTE

#### **g) Fines**

There were no fines incurred in this quarter.

#### **Issues arising**

It has been noted that some Trainees have stayed beyond their hours and this is not being documented as an exception. This has been encouraged and passwords reissued as advised.

#### **Actions taken to resolve issues**

1. Encourage Trainees to record their exception reports
2. Recruit Guardian of Safe Working

#### **Summary**

The information in this report confirms that for this quarter, the working hours of ward-based doctors in training (F2, CMT and GP trainees) and Oncology Trainee doctors were compliant with both the 2002 and 2016 contracts. Locums were used appropriately to cover on-call shifts during this time period.

#### **Questions for consideration:**

Within this organization, working hours for doctors in training are considered safe at the current time. The information collected and documented in this report provides

assurance for this. It is noted that whilst Haemato-Oncology has now been integrated as part of Clatterbridge Cancer Centre services, the Haematology doctors in training remain under monitoring by The Royal Liverpool University Hospital as their clinical rotations are organized regionally and their rotas are part of The Royal Liverpool University Hospital junior doctors rotas.

Further monitoring of doctors in training at Clatterbridge Cancer Centre will be continued as an on-going process. No questions are raised on this issue currently.