

**Guardian of Safe Working Annual Report**  
**University Hospitals Dorset – Royal Bournemouth Hospital**  
**Annual Report – Year 1<sup>st</sup> July 2021 – 30<sup>th</sup> June 2022**

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## **Executive Summary**

This report provides the overview of exceptions raised for the period 1<sup>st</sup> July 2021 through to 30<sup>th</sup> June 2022.

Over the year there were a total of 418 exception reports, an increase of 181. The majority of these came from General Medicine, Geriatric Medicine, General Surgery and Gastroenterology in this order. 72% of these related to hours of work and the remainder were due to exceptions in pattern of work, loss of educational opportunities and service support available to the doctor.

- There have been 18 reports highlighted as immediate patient safety concern that were addressed and resolved, this is a marked increase on the 2 safety reports from 20/21.
- 316 were paid overtime (an increase from 184 20/21).
- There were 4 work schedule reviews all with a satisfactory conclusion.

The Junior Doctor Committee has 3 co-leads to the committee. The Junior Doctor Forum met three times – twice of which were joint. Regular meetings and attendance to the junior doctor forum remain challenging. The aim is to continue the joint meetings with Poole Hospital JDC as well as continue with hospital specific meetings.

## High Level Data

The Table and Figure 1 below, from the Allocate software, provides a breakdown of the total number of exception reports received during the period 1<sup>st</sup> July 2021 to 30<sup>th</sup> June 2022. A comparison with 2020/21 is also provided:

Department	Sum of Total Exceptions Submitted 2020-21	Sum of Total Exceptions Submitted 2020-21	Increase/ Decrease
Acute	18	5	↓
Cardiology	13	12	↓
Dermatology	1	0	↓
Emergency (A&E)	1	2	↑
Gastroenterology	38	34	↓
General Medicine	66	171	↑
General Surgery	40	68	↑
OPS	51	88	↑
Psychiatry – Old Age	1	0	↓
Respiratory	7	6	↓
Stroke Medicine	1	0	↓
OPAU	0	4	↑
Haematology	0	11	↑
Vascular	0	1	↑
Ophthalmology	0	16	↑
<b>TOTAL</b>	<b>237</b>	<b>418</b>	<b>76%</b>

Table 1

There is a marked increase in the number of exception reports, an increase of 181 (57%) overall. This is largely due to an increase in reporting for Haematology, General Medicine, General Surgery, OPS and Ophthalmology.

- General Medicine: 159%
- General Surgery: 70%
- OPS 72%

Haematology and Ophthalmology had no exception reports in the previous year (2020/21)

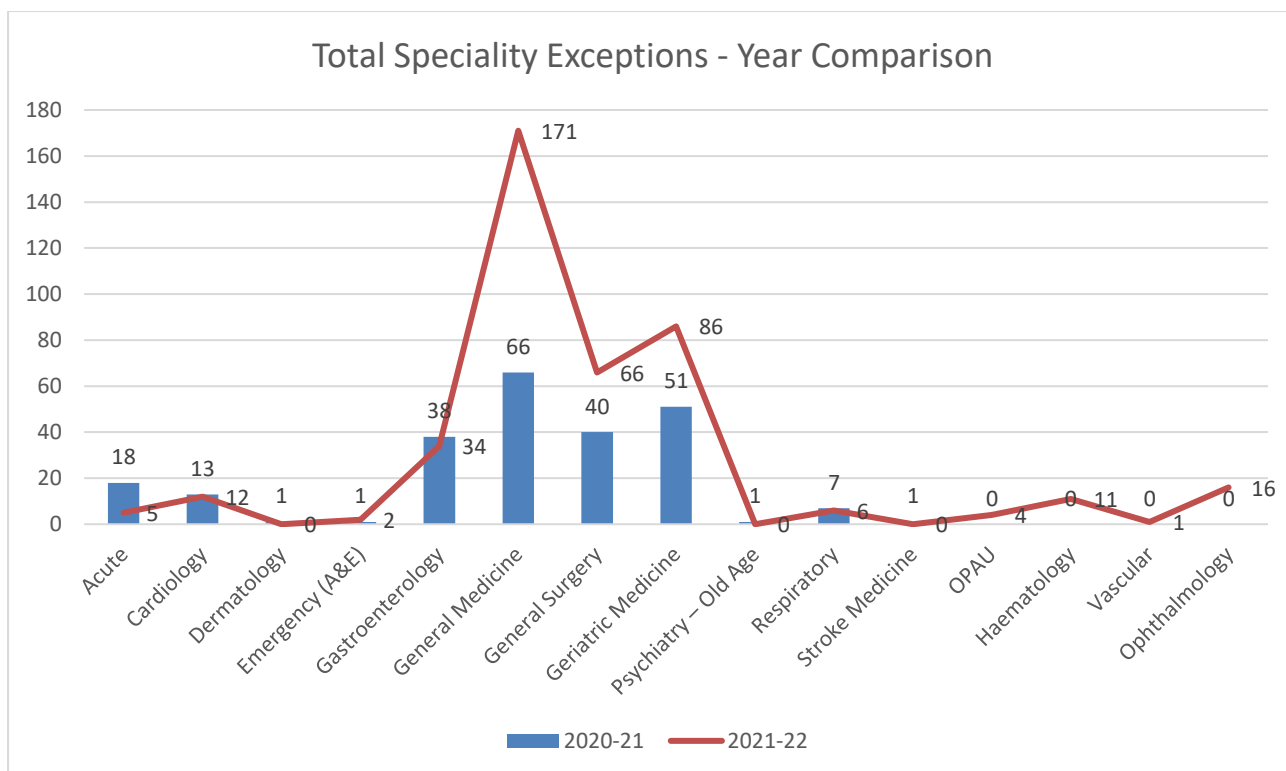


Figure 1

The data in figure 1 highlights specialties that have generated the highest number of exception reports over the last year. This enables focus to be given to support specialties in reducing exception reporting thus providing a good learning environment for doctors in training.

**Table 2** shows a breakdown of type of exception report. 72% of the total 418 exceptions raised were related to hours of work and the remainder were due to exceptions in pattern of work, loss of educational opportunities, natural breaks/rest and service support available to the doctor.

Reasons given for Exception Reporting	Number of Exceptions 20/21	Number of Exceptions 21/22	Increase
Relating to Immediate Patient Safety	3	18	500%
Relating to hours of working	216	302	40%
Relating to pattern of work	5	13	160%
Relating to educational opportunities	7	39	457%
Relating to service support	9	36	300%
Relating to natural breaks/rest	0	28	-
Total Exceptions Raised	237	418	76.37%

Table 2

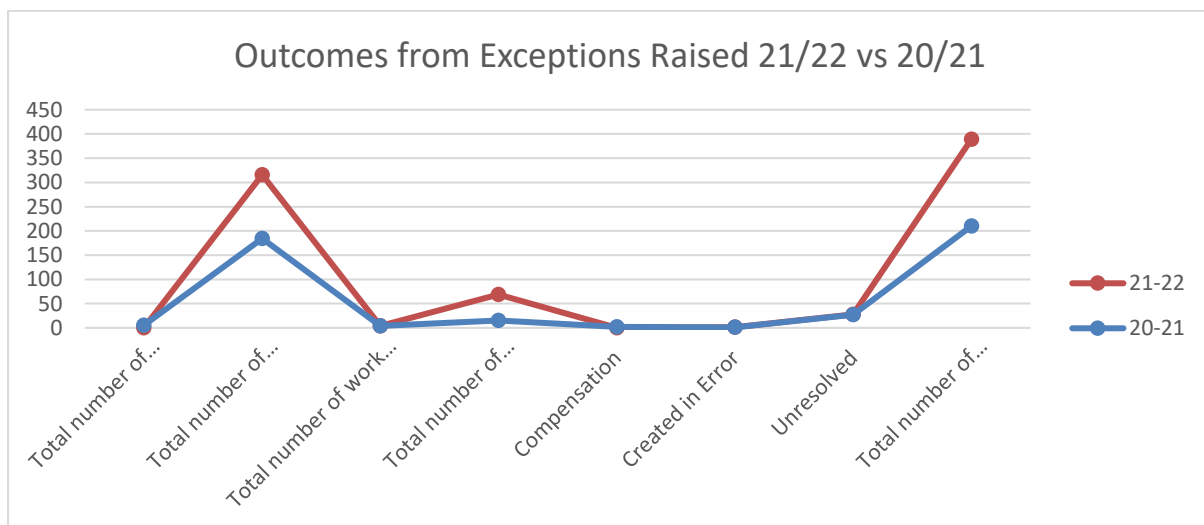
There were a total of 18 reports highlighted as immediate patient safety concern that were addressed and resolved please see Appendix 1.

**Table 3** below shows breakdown of resolution with 316 paid overtime and 4 Work Schedule Reviews. There were 28 unresolved exceptions because meeting between the reporter and educational supervisor did not take place.

<b>Exceptions Raised: Outcomes</b>	<b>20-21</b>	<b>21-22</b>	<b>Increase</b>
Total number of exceptions where TOIL was granted	5	0	-
Total number of overtime payments	184	<b>316</b>	<b>72%</b>
Total number of work schedule reviews	4	<b>4</b>	-
Total number of reports resulting in no action	15	<b>69</b>	<b>360%</b>
Compensation	2	0	-
<b>Total number of resolutions</b>	<b>210</b>	<b>389</b>	<b>85%</b>
Created in Error	1	1	-
Unresolved	27	28	3.70%

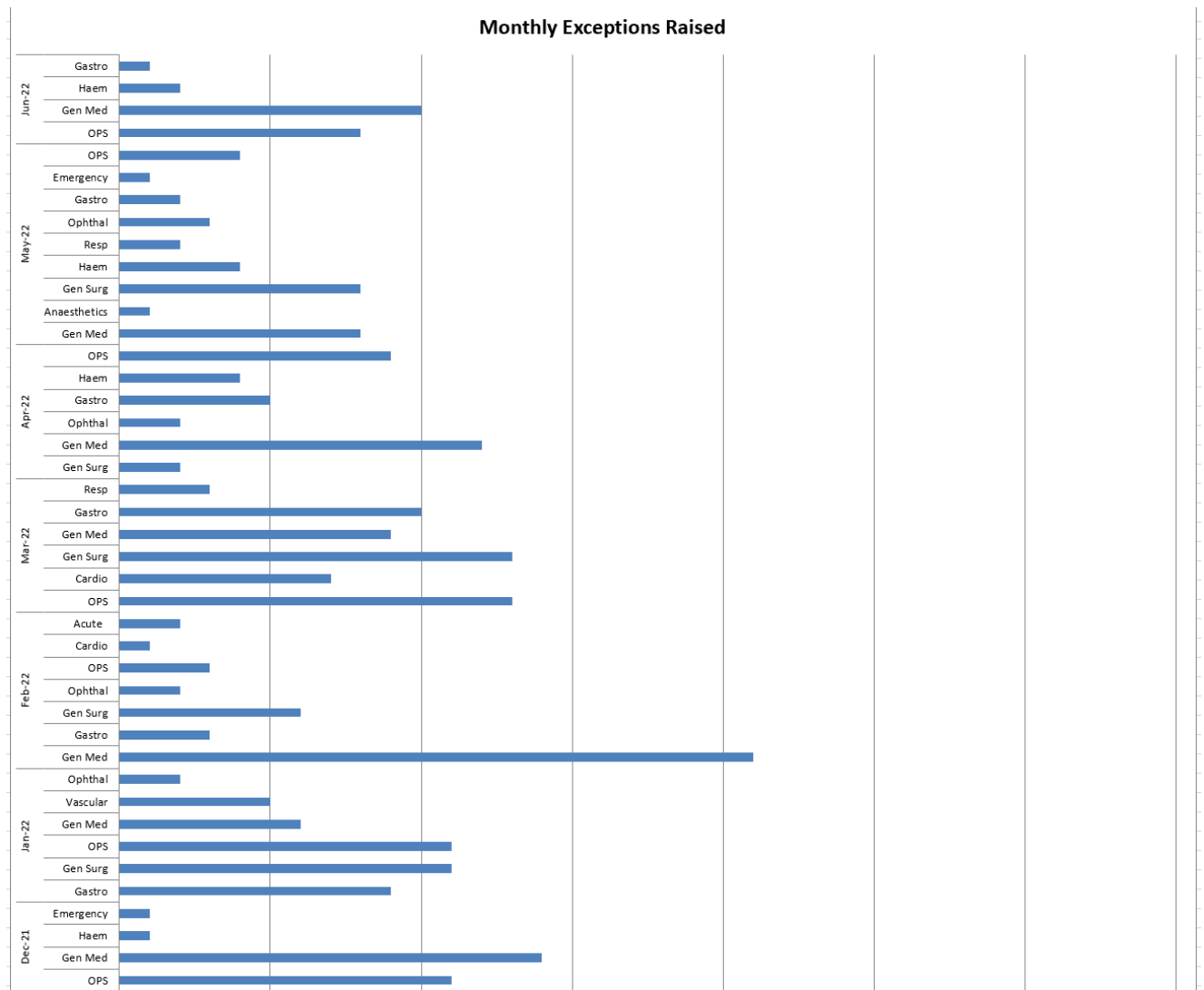
*Table 3*

The below depicts the data in graphical format:



*Figure 2*

Figure 3 below breaks down the exception reports further by showing the number of exceptions reported by specialty by Month between July 2021 and June 2022.



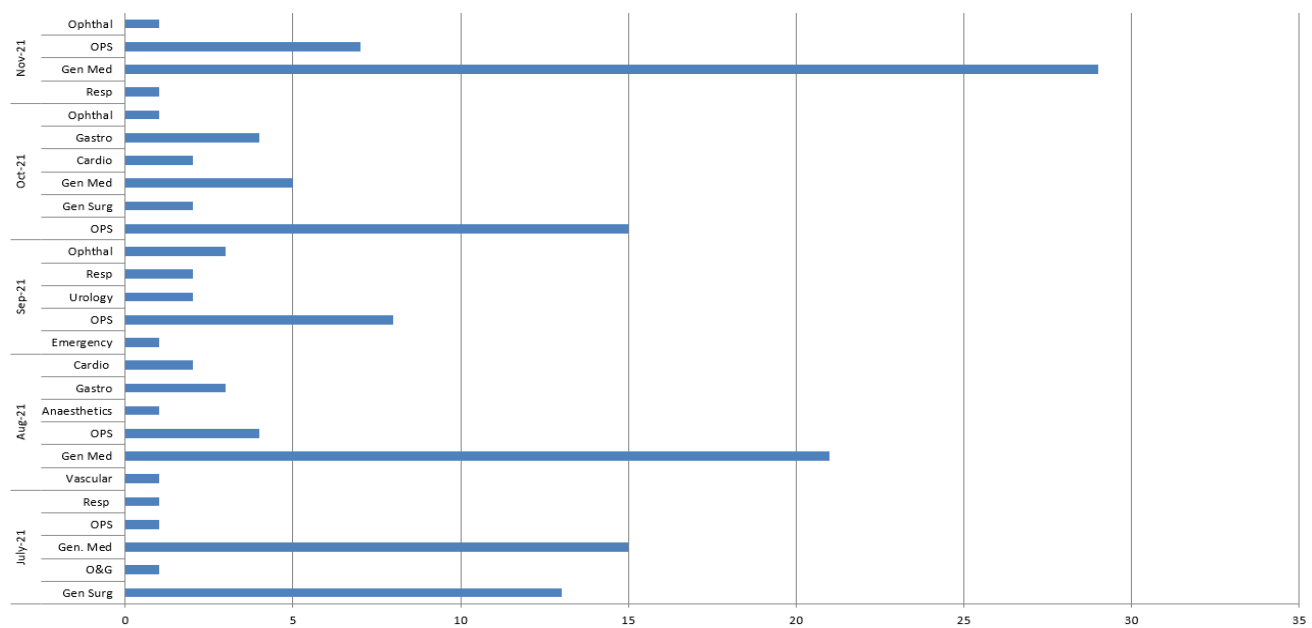


Figure 3

### Reporting Grades for Period 1st July 21 – 30<sup>th</sup> June 22

Grade	July- Sept 21	Oct – Dec 21	Jan – Mar 22	Apr – Jun 22	Total
<b>FY1</b>	65	46	78	32	<b>221</b>
<b>FY2</b>	18	23	6	17	<b>64</b>
<b>ST1</b>	4	6	20	21	<b>51</b>
<b>IMT</b>	2	2	8	11	<b>23</b>
<b>ST3</b>	1	10	10	6	<b>27</b>
<b>ST4</b>	1	1	0	2	<b>4</b>
<b>ST5</b>	1	0	0	0	<b>1</b>
<b>ST6</b>	1	3	1	6	<b>11</b>

Source Medical Resourcing Table 4

### Reasons for Locum Bookings for Period 1<sup>st</sup> July 2021 – 30<sup>th</sup> June 2022

The tables on the next two pages provide an overview of the pressures of workload for our junior doctors. Highlighted below are the total number of shifts requested by reason and how many of these were worked.

Reason	Number of shifts Requested	Number of shifts Worked
Acuity	39	39
Ad hoc	69	69
Annual Leave	103	82
Coronavirus	538	273
Escalations	89	85
Maternity/Paternity Leave	6	3
Service Demand/ Workload (e.g. winter pressures)	1,258	360
Sickness	748	296
Study Leave	11	4
Urgent Clinical Need	8	6



Trust Vacancy	1784	1171
Civil Duty	3	1
<b>TOTAL</b>	<b>2,342</b>	<b>2,019</b>

Table 5

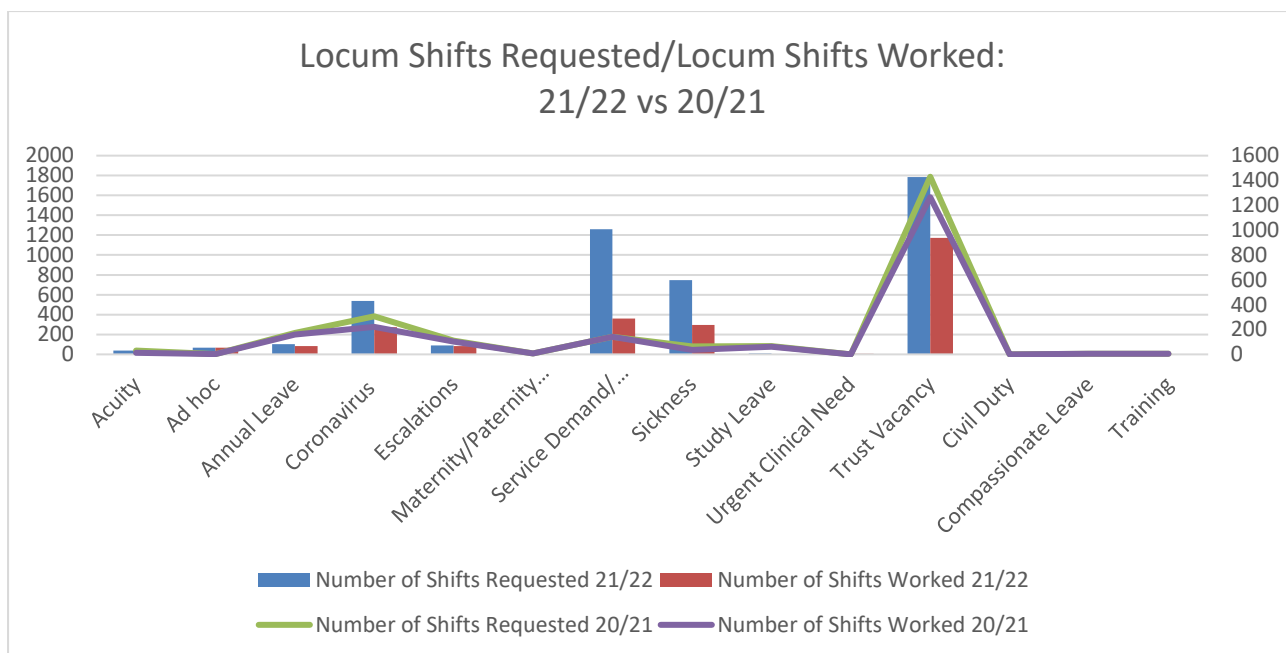


Figure 4

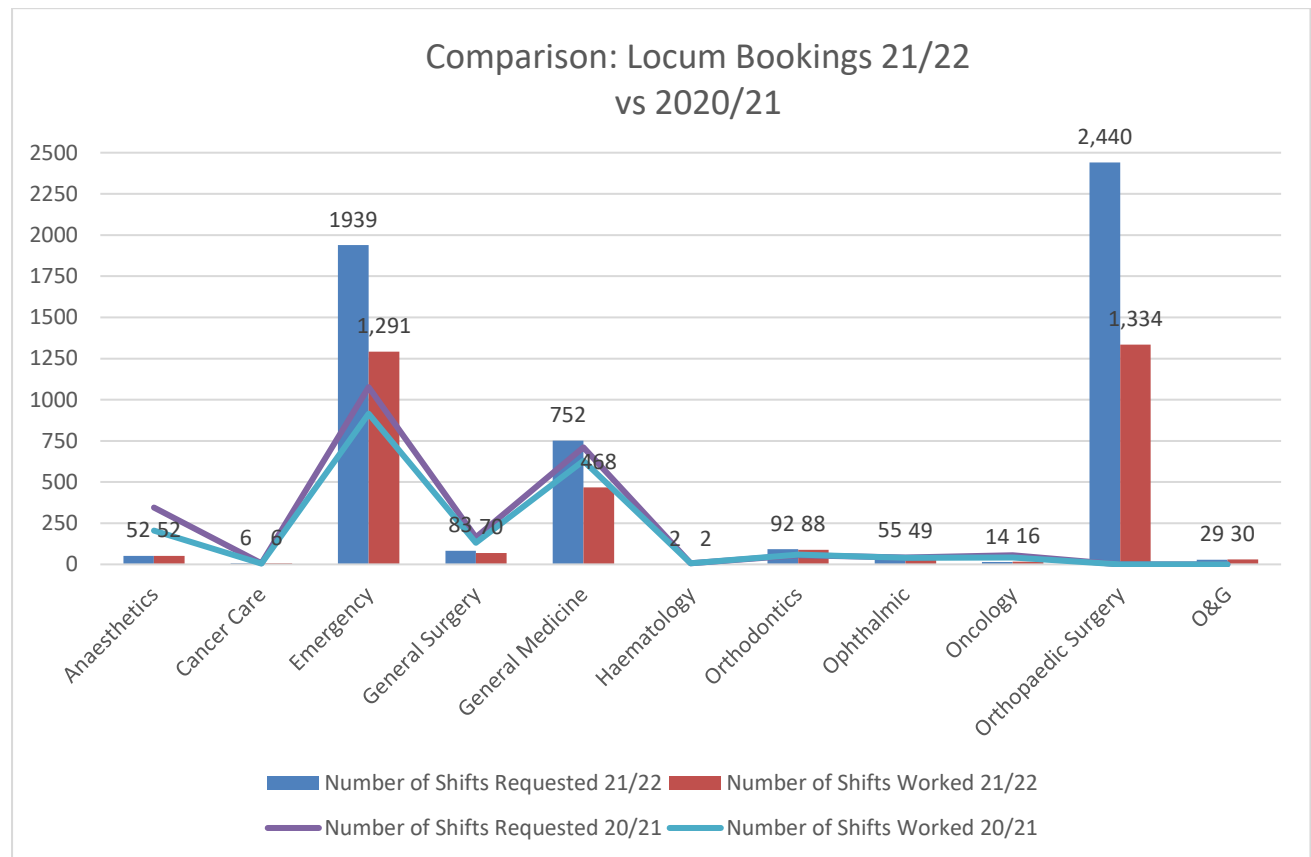
### Locum bookings by speciality for Period 1<sup>st</sup> July 2021 – 30<sup>th</sup> June 2022

Highlighted are the total number of shifts requested from specialties and how many of these were worked.

Specialty	Number of shifts requested	Number of shifts worked
Anaesthetics	52	52
Cancer Care	6	6
Emergency	1939	1,291
General Surgery	83	70
General Medicine	752	468
Haematology	2	2
Orthodontics	92	88
Ophthalmic	55	49
Oncology	14	16
Orthopaedic Surgery	2,440	1,334
O&G	29	30
<b>TOTAL</b>	<b>2,498</b>	<b>2,063</b>

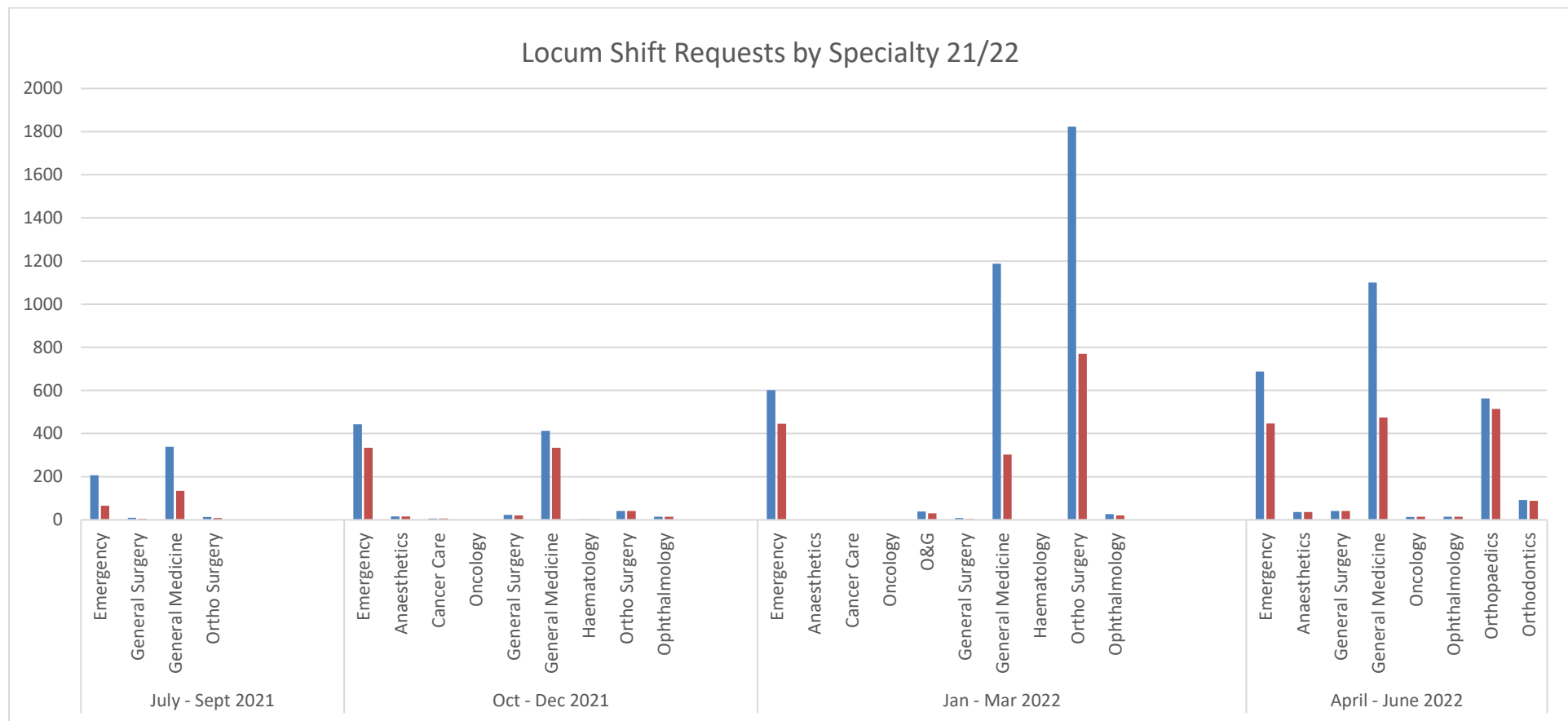
Table 6

The table below shows the data in graphical format broken down into their respective specialties: Shifts Requested and Shifts Worked 2021/2022. This also depicts that data from 2020/2021 as a comparison:



*Figure 5*

The figure 6 below depicts the Locum Shift Requests by Specialty 21/22 in graphical format broken down into their respective quarterly requests:



*Figure 6*

## **Summary**

1. There has been a significant rise in exception reports in the year 2021/22 compared to the previous year. There was a total of 418 exception reports, an increase of 181. The majority of these came from General Medicine, Geriatric Medicine, General Surgery and Gastroenterology in this order. 72% of these related to hours of work and the remainder were due to exceptions in pattern of work, loss of educational opportunities and service support available to the doctor. This increase in exception reporting is a reflection of the pressures on the work force that have also been highlighted in the GMC survey.
2. There have been 18 reports highlighted as immediate safety concern. Important themes related to poor staffing levels and lack of support. All reports have been escalated to directorates for investigation and have been resolved but the underlying reasons for these reports being put in in the first place remain. There were 4 work schedule reviews all with a satisfactory conclusion.
3. There have been 0 fines imposed for any breach of the doctors in training contract for this period. There were 4 work schedule reviews that have been resolved.
4. This past year has seen a negative effect on junior doctors access to training due to COVID, although much has moved to Teams, there were still issues during this period with access to education and training. The easing of COVID restrictions from August 2021 has significantly increased pressure on the workforce.
5. The GoSW attends meetings between the Trust and HEE to monitor the learning environment.
6. It is the intention for the Junior Doctor Forums to be held every other month, although due to workload pressures it has been difficult to coordinate these. Attending these sessions are a valuable opportunity for our Doctors representatives to meet with the Guardian, Chief Medical Officer, Director of Medical Education, BMA (some attendances) in one place. Issues addressed over the past year have included:
  - Rota difficulties
  - Continued progression on the Fatigue and Facilities Charter
  - Attendance at JDF by Trust staff
  - Increased awareness to raise the concerns as they happen in order to resolve in a timely manner
  - Trust and confidence that issues raised by the doctors are considered and reported back in a timely manner
  - Encourage the use of exception reporting to highlight breaches in the training contract.

## **Recommendations**

1. To support and encourage the work of the Guardian and the Director of Medical Education in engaging Educational Supervisors and Consultants in the exception reporting system to reduce the number of unresolved cases.
2. To ensure a positive regard for the education of trainee doctors recognising the importance of the medical workforce and safeguarding the balance of service provision and education.
3. To support initiatives to improve the doctors in training experience at UHD and strengthening the Trust's reputation and attractiveness as a training provider/employer.

**Patient Safety Concerns 21/22**

A total of 18 reports highlighted as immediate patient safety concern that were addressed and resolved, this is a marked increase from the 2 Patient Safety Concerns raised during 2020/21

<b>1<sup>st</sup> July – 30<sup>th</sup> September 2021</b>	
<b>Specialty</b>	<b>Grade Raising Exception</b>
Respiratory	F1
General Medicine	F2
General Surgery	F1

<b>1<sup>st</sup> October – 31<sup>st</sup> December 2021</b>	
<b>Specialty</b>	<b>Grade Raising Exception</b>
Geriatric Medicine	F1
Geriatric Medicine	F1
General Medicine	F1
General Medicine	F1
General Medicine	F1
General Medicine	F1
Geriatric Medicine	ST6
General Medicine	ST1

<b>1<sup>st</sup> January – 31<sup>st</sup> March 2022</b>	
<b>Specialty</b>	<b>Grade Raising Exception</b>
Geriatric Medicine	ST1
General Surgery	F1

<b>1<sup>st</sup> April – 30<sup>th</sup> June 2022</b>	
<b>Specialty</b>	<b>Grade Raising Exception</b>
Haematology	IMT1
OPS	IMT2
OPAU	F1
OPAU	F1
General Medicine	F1