

## Public Board of Directors

**Item number: 12**

**Date: 28 May 2025**

Confidential/public paper:	Public
Report Title:	Guardian of Safe Working Annual Report – 1 <sup>st</sup> April 2024 to 31 <sup>st</sup> March 2025
Author(s)	Dr Zoe Kwan, Guardian of Safe Working
Accountable Director:	Dr Helen Crimlisk – Executive Medical Director
Presented by:	Dr Helen Crimlisk – Executive Medical Director
Vision and values:	The role of the Guardian of Safe Working includes being a champion for safe working hours to ensure delivery of outstanding care ( <b>we keep improving</b> ), overseeing safety relating to exception reports ensuring a great place to work and effective use of resources ( <b>we work together</b> ).
Purpose:	The purpose of the Guardian of Safe Working Report is to provide assurance that postgraduate doctors in training (PgDiT) at Sheffield Health and Social Care NHS FT are working safe hours, and that exception reports are reaching a timely and satisfactory resolution in line with the terms and conditions of service for NHS doctors and dentists in training (England) 2016 and working time regulations (WTR). The report also provides information on reasons for absence and the use of locums to staff the out-of-hours rota.
Executive summary:	<p>The duty of the guardian of safe working is to ensure that postgraduate doctors in training work safe hours. Assurance is provided that from April 2024 to March 2025, resident doctors at Sheffield Health and Social Care NHS FT worked safe hours.</p> <p>This report provides assurance around the working hours of postgraduate doctors in training. The guardian of safe working will consider the individual circumstances of all issues raised and that the principles of ensuring equality, diversity and inclusion are adhered to. All postgraduate doctors in training continue to work hours that are compliant with their contracts and all relevant legislation.</p> <p>The British Medical Association (BMA) resident doctors (postgraduate doctors in training) committee secured an agreement on the exception reporting reform and the deadline for implementation is 12 September 2025. A meeting will be held on 9 June to create the action plan for SHSC to meet the deadline and required adjustments to relevant procedures.</p> <p>The British Medical Association (BMA) resident doctors committee has announced that resident doctors in England will be balloted for strike action over their pay. The ballot will open on 27 May 2025 and close on 7 July 2025.</p> <p>There continues to be an ongoing risk associated with postgraduate doctors in training with long term health conditions coming off the on-call for considerable periods of time whilst still retaining a slot on the out of hours rota. This creates an increased requirement for locum cover and the associated costs and risks. This could include increased pressure on working hours for the non-resident on-call rota should a shift be unfilled requiring doctors to work additional hours to ensure patient safety.</p>

	<p>However, the number of shifts uncovered continue to be significantly low totalling 4 out of 510 shifts (0.75%) between April 2024 and March 2025. There is also a low number of exception reports highlighting a limited impact on doctor's working hours. It is also noted that all 4 vacant shifts were Intermediate level and so their continued to be senior support and supervision from registrars as part of out of hours services across SHSC NHS FT. There is ongoing work to agree clearer Trust procedures through a Standard Operating Procedure for supporting Postgraduate Doctors in Training with long term health conditions.</p> <p>The Trust continues to maintain a rigorous exception reporting system utilising electronic system's through Allocate's cloud-based platform.</p> <p>Dr Zoe Kwan has recently been appointed as the Trust's new guardian of safe working replacing Dr Raihan Talukdar.</p> <p>Dr Zoe Kwan as guardian of safe working regularly attends the medical education, experience &amp; equality group as part of the governance structure overseeing the education and experience of postgraduate doctors in training placed with the Trust.</p>
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Which strategic objective does the item primarily contribute to:					
Effective Use of Resources	Yes	X	No		
Deliver Outstanding Care	Yes	X	No		
Great Place to Work	Yes	X	No		
Reduce inequalities	Yes		No	X	

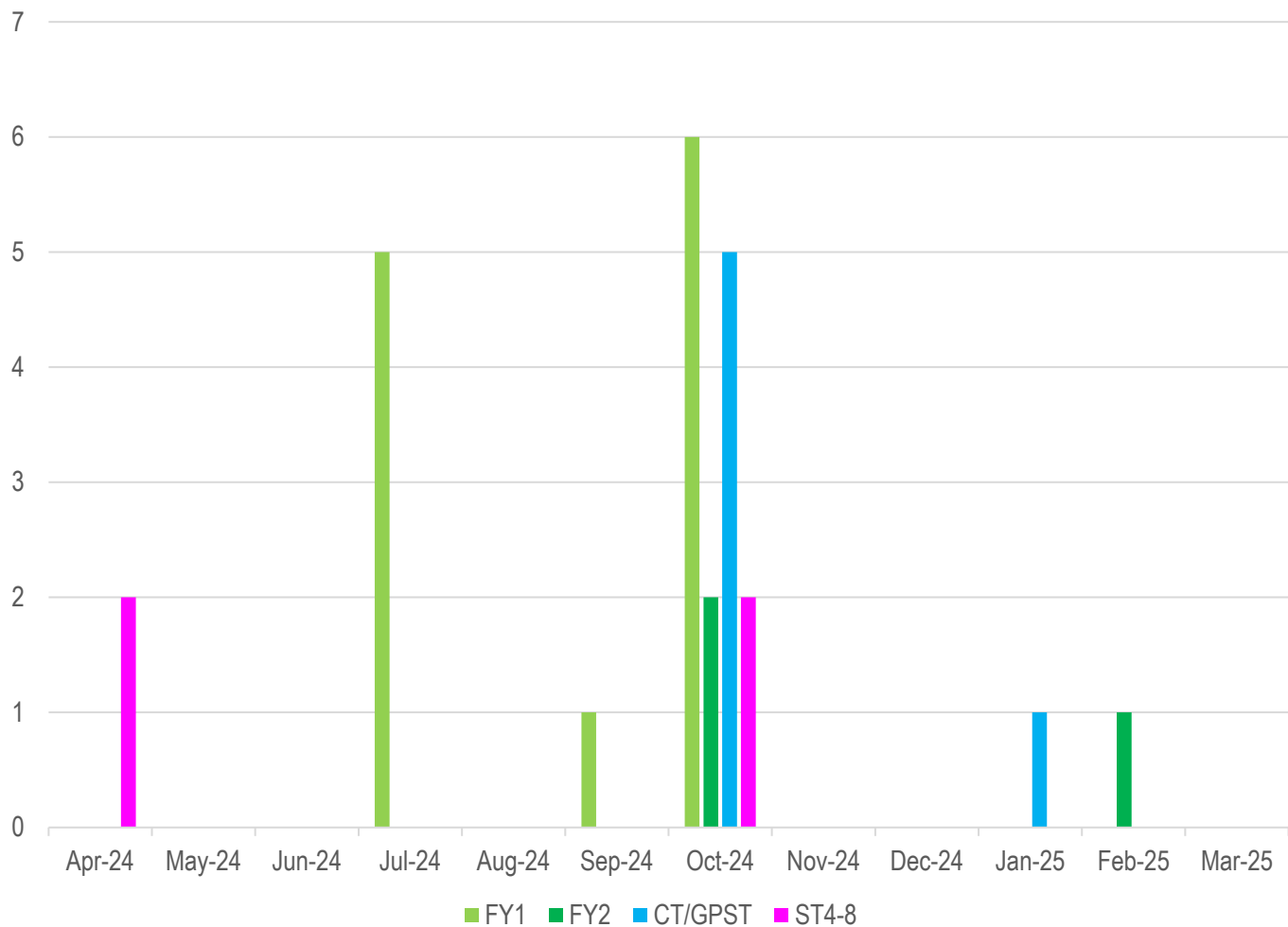
What is the contribution to the delivery of standards, legal obligations and/or wider system and partnership working.	
Links to Care Quality Commission Quality and Safety Standards: Safety and Quality of service provision, Staffing, Supporting Workers	
<b>Board assurance framework (BAF) and corporate risk(s):</b>	<p><b>BAF 0014</b> There is a risk of failure to undertake effective workforce planning (train, retain and reform) to support recruiting, attracting and retaining staff to meet current and future needs.</p> <p><b>Risk 5409</b> A risk to patient safety due medical staffing and recruitment challenges resulting in a sub-optimal level of medical capacity in inpatient and community services</p>
<b>Any background papers/items previously considered:</b>	<p>This report is received annually at the Trust Board and gives an overview of the 4 quarterly reports as follows:</p> <p>Q1 – April 2024 to June 2024  Q2 – July 2024 to September 2024  Q3 – October 2024 to December 2024  Q4 – January 2025 to March 2025</p>
<b>Recommendation:</b>	<p>The Board of Directors is asked to:</p> <ul style="list-style-type: none"> <li>▪ <b>Note for assurance</b> that resident doctors at Sheffield Health and Social Care continue to keep safe working hours.</li> <li>▪ <b>Note for assurance</b> that the exception reporting process continues to support safe working and enable the appropriate compensation of additional hours worked and that the exception reporting reform will be appropriately implemented by the deadline of 12 September 2025.</li> </ul>

## High Level Data for Sheffield Health and Social Care

Number of Doctors in Training (Total)	46 – 50
Number of Doctors in Training on 2016 TCS (Total)	46 – 50

## Exception Reports

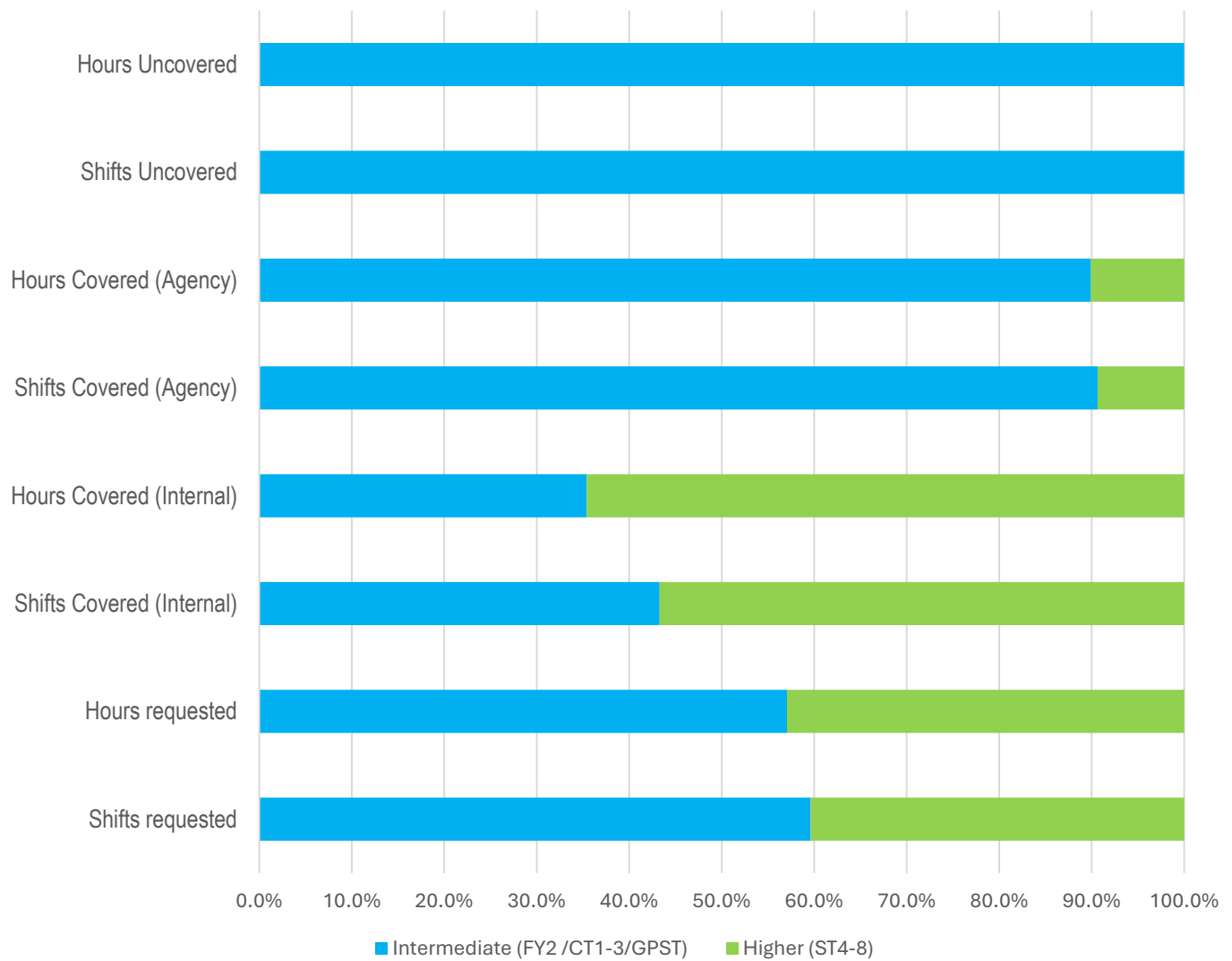
(with regard to working hours)



Month	Grade				
	FY1	FY2	CT/GPST	ST4-8	TOTAL
Apr-24	0	0	0	2	2
May-24	0	0	0	0	0
Jun-24	0	0	0	0	0
Jul-24	5	0	0	0	5
Aug-24	0	0	0	0	0
Sep-24	1	0	0	0	1
Oct-24	6	2	5	2	15
Nov-24	0	0	0	0	0
Dec-24	0	0	0	0	0
Jan-25	0	0	1	0	1
Feb-25	0	1	0	0	1
Mar-25	0	0	0	0	0

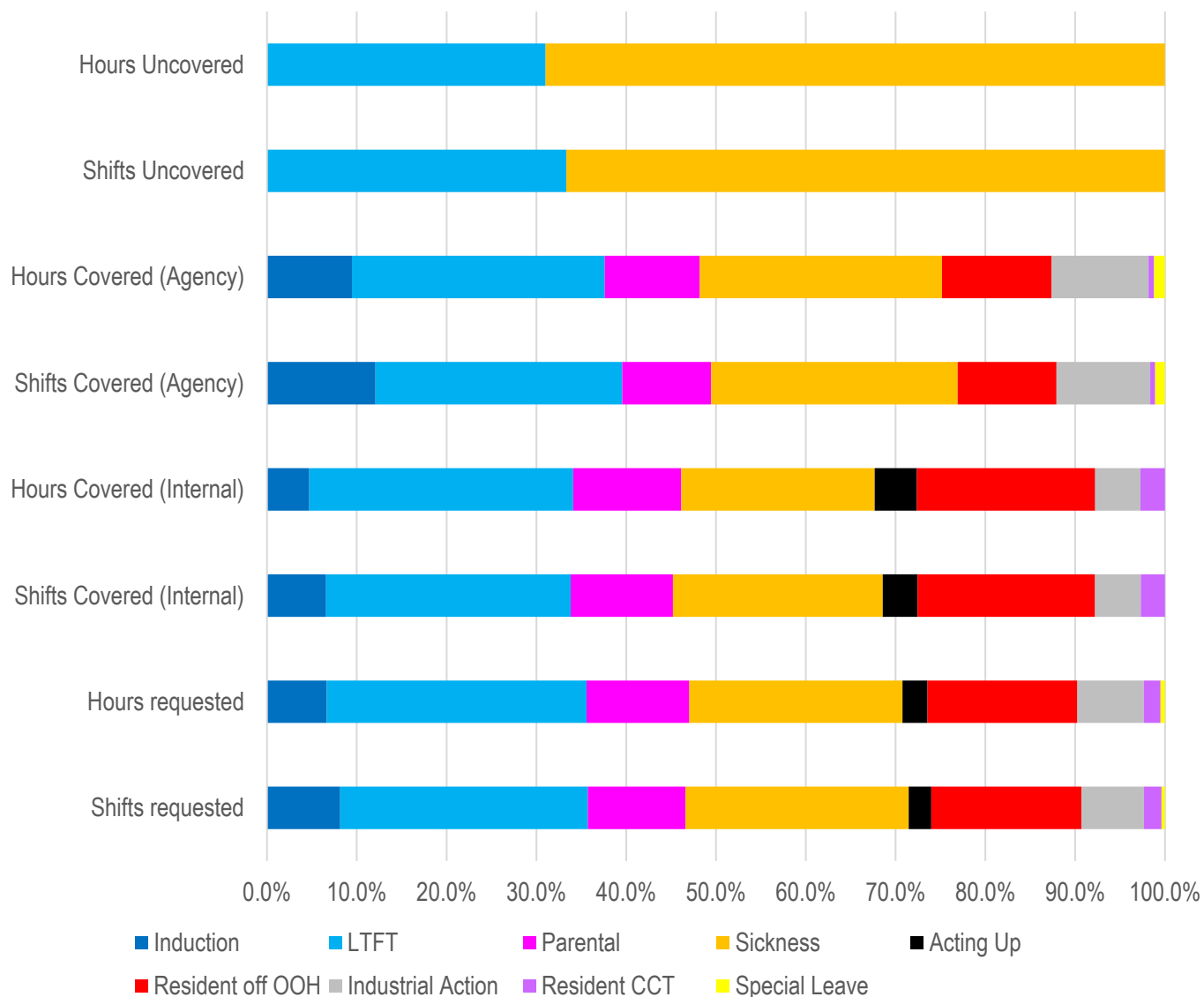
## Annual Data Summary

### Out of Hours Locum Bookings (by grade)



Reason Category	Shifts requested	Hours requested	Internal		Agency		Shifts Uncovered	Hours Uncovered
			Shifts Covered	Hours Covered	Shifts Covered	Hours Covered		
<b>FY2 /CT1-3/GPST</b>	304	2794	145	1043.5	155	1782.5	4	18
<b>ST4-8</b>	206	2103	190	1903	16	200	0	0

## Out of Hours Locum Bookings (by reason)



Reason Category	Shifts requested	Hours requested	Internal		Agency		Shifts Uncovered	Hours Uncovered
			Shifts Covered	Hours Covered	Shifts Covered	Hours Covered		
Induction	42	333	22	139	22	194	0	0
LTFT	142	1447	91	865.5	50	577	1	4.5
Parental	56	572	38	355	18	217	0	0
Sickness	128	1187.5	78	634.5	50	553	2	10
Acting Up	13	138.5	13	138.5	0	0	0	0
Resident off OOH	86	835	66	585	20	250	0	0
Industrial Action	36	370	17	148.5	19	221.5	0	0
Resident CCT	10	93	9	80.5	1	12.5	0	0
Special Leave	2	25	0	0	2	25	0	0

## Issues arising and actions taken to resolve issues

- There continues to be a low number of Exception Reports submitted by Postgraduate Doctors in Training. The dominant number of those submitted related to additional hours worked relating to their normal working hours for clinical reasons, all such cases are resolved with time off in lieu. It is noted there was a specific spike by intermediate level Postgraduate Doctors in Training in October 2024 which is understood to be related to inpatient staffing levels which has now been resolved.
- There continues to be several Postgraduate Doctors in Training with long term health conditions being taken off the on-call rota with no confirmed return to these duties whilst retaining allocated shifts. This has created a significant increase in the requirement for locum cover and the risk of unfilled shifts and potential impact on the safe working hours of Postgraduate Doctors in Training. However, there has been only 4 out of 510 shifts going vacant and all were at the intermediate levels with full senior clinician support during out of hours service delivery. Work is ongoing to help tackle this including a Master Vendor, medical bank and other initiatives to reduce locum spending and reliance on agency staff. Work is also ongoing between the Medical Education & Staffing Department and the People Directorate to develop a clear series of procedures under Trust policy to support Postgraduate Doctors in Training with long term health conditions.
- A low number of exception reports related to missed training opportunities. These were all resolved satisfactorily through the involvement of the Director of Medical Education. It is noted that this process forms part of the new nationally agreed amendments to exception reporting procedures due to come into effect from September 2025.
- Although we receive a low number of exception reports the Board is assured that the Guardian of Safe Working proactively engages with Postgraduate Doctors in Training through their induction and the quarterly Resident Doctor Forums to promote and encourage exception reporting where appropriate to do so. This is also supported by a dedicated section on the Health Toolbox app available to all Postgraduate Doctors in Training.
- It is noted that Postgraduate Doctors in Training are being balloted by the British Medical Association to take strike action related to ongoing national disputes over their pay.

## Summary

Training fill rate for the Trust continues to be high with a low number of vacancies within the Trust. Continue to be a low number of Exception reports primarily around additional hours worked during their normal working hours. There has been a few ERs around training opportunities which have been raised to the DME, this forms part of new procedures that will need to be in place for September 2025 with work underway to ensure compliance.

Although there has been a noticeable impact on the number of locum shifts required within the Trust due to long term health conditions of doctors included on the out of hours rota the data shows this has not had a significant impact on service delivery or safe working hours with a low number of vacant shifts and associated ERs for out of hours duties.

Resident Doctor Forums continue to be well attended and engaged with. The meeting is hybrid and considered as protected time for residents. Clinical supervisors support their attendance.

Attendance at the Regional Guardian of Safe Working Meetings ensures that SHSC aligns with best practice and is appraised with updates such as guidance from the BMA.

The Guardian of Safe Working participates in the Medical Engagement, Experience, and Equality Group, advocating for the views of Postgraduate Doctors in Training.

## Recommendation

The Board of Directors is asked to:

**Note for assurance** that resident doctors at Sheffield Health and Social Care continue to keep safe working hours.

**Note for assurance** that the exception reporting process continues to support safe working and enable the appropriate compensation of additional hours worked and that the exception reporting reform will be appropriately implemented by the deadline of 12 September 2025.