**JUNIOR DOCTOR’S FORUM - Guy’s & St. Thomas’ NHS Foundation Trust**

**Minutes of the Meeting held on 4th December 2017, South Wing Lecture Theatre, St Thomas’ with video link to the Sherman Centre, Guy’s Hospital.**

**PRESENT**

Rosalinde Tilley (GOS) Guardian of Safe Working (GOS - Chair)

Georgina Charlton (GC) Deputy Freedom to Speak Up Guardian

Lisa Campbell (LC) Project Support Officer (Minutes)

Pauline Flockhart Head of Medical Workforce

Trainee representatives from:

Neonatal Unit

Palliative Medicine

Geriatrics

Renal

Genetics

**1. APOLOGIES**BMA Rep

**2. MINUTES & MATTERS ARISING**

GOS welcomed everybody to the meeting.

Minutes and Actions from the last meeting were discussed and agreed.

**3. REPORT FROM GOS**

* **Exception Report Trend** Aug-Nov



* Reason’s for exception reporting
* Exception Report Outcomes Aug-Nov 2017
* Department Exception Report Aug-Nov 2017
* Palliative Care

* **Fines Update**

|  |  |
| --- | --- |
| Fines by department | |
| Department | Value of fines levied |
| Paediatric Cardiology | £321.7 |
| Nephrology | £436.31 |
| Oncology | £27.69 |
| Total | £785.70 |

|  |  |  |  |
| --- | --- | --- | --- |
| Fines (cumulative) | | | |
| Balance at end of last quarter | Fines this quarter | Spend this quarter | Balance at end of this quarter |
| £197.69 | £785.70 | £0.00 | £983.39 |

One of the reasons some departments incur many fines is because some departments are unable to give TOIL to their trainees due to a tight rota. Therefore the trainees are paid for their time and this sometime incurs a fine.

The existing fines have not been spent. The GOS proposed that in departments incurring substantial fines 25% would be ring fenced for the specific use of that department the residuum being utilised more widely for trainees across the trust to be used for training or improving their work environments. The Palliative Care trainee suggested ring-fencing a proportion of all fines from their department due to trainees working outside of the trust in Palliative care and unable to benefit from trust based improvements. This was agreed.

Possibilities for spending ring fenced funding, were proposed for refreshments on a training/Study day or a study leave budget for additional training/study days.

One representative suggested providing exception reporting or GOS websites in an application form. GOS informed the group of the exception reporting systems available (DRS and Allocate). DRS is not available in an application form, this has been explored by the GOS with the manufacturers, who will not support an application. The GOS will explore an App for the GOS website.

**Action:** GOS to explore App options for GOS website

* **Changes as a Result from Exception Reporting**

GOS informed the group, of improvements that have been implemented into departments which had a high number of exception reports. Improvements happened due to receiving additional resources, shift timing changes, bank shifts increased and changes in working patterns.

* Renal
  + Additional resources
  + Shift timing changes
* GUM
  + Shift timings changed
  + Split shifts stopped
* Urology
  + Shifts removed/reduced: match work schedule
  + Rota stability
* Oncology
  + Additional resources
  + Substantive post funded
  + Changed working patterns
* Vascular
  + New compliant rotas
  + Bank shifts increased
  + 2 Additional posts funded
* PICU
  + Shift times match handovers
* ED
  + FPP to all eligible trainees
* **DRS accessibility improvements**

GOS updated the group on developments. Passwords now do not expire so quickly (previously 24 hours) after a trainee’s DRS account is initially set up. Trainees and supervisors are now given a prolonged period to logon after receiving initial details. Passwords still need to be changed (to something memorable) after an initial login.

HR/GOS are not always provided with trainees supervisor details. This is required for a trainee to gain access to DRS. To prevent this in future, HR will set up all trainees on DRS on their start date. For those lacking supervisor details, the Educational lead will be allocated as the supervisor. The trainee can then request the Guardian of Safe working Project Officer (Lisa Campbell) to update their DRS profile to the correct supervisor.

**Action:** GOS to email all trainees to inform them of the new protocol

* **Medical HR Drop In Sessions**

In response to the large number of payment based queries raised by trainees at the previous JDF and other meetings, HR are now providing drop in sessions, for trainees to discuss payment problems. The first of these was held shortly after payday in November, with sessions simultaneously on the STH and Guys sites.

The sessions were very popular with tax and understanding the payslip being the greatest concerns.

Getting the correct paperwork for applying for mortgages has been a challenge for the trainees as well as completing self assessment tax returns. Most trainees were unaware of payment dates each month.

Trainees considered that utilisation of some fines money for this would benefit juniors broadly across the trust.

**Action:** GOS to work with HR to have some payroll based FAQs added to the GOS website

**Action:** Investigate embedding a video on the GOS website explaining payslips and URL’s to the Government Self-assessment sites

**Action**: Investigate creating a presentation Session/Talk on Understanding your Payslip or Finance Talks on Mortgages. This would support the trainees in completing their tax assessment forms and therefore saving money by not requiring an accountant and how to apply for mortgages.

**Action:** HR will send out details of next HR Drop In sessions

**Action:** HR to confirm the next pay date

**Action:** GOS to investigate tax, PAYE advice sources

Their salary should be on their contract and on their generic work schedule. The Palliative care trainees said that in some cases this was only a range and not an exact salary. PF informed the group that the trust may not be aware of salary point of registrars on the new contract but paid on the old contract at the time of issuing the work schedule. However, salary details on contracts should take this into account. She requested an example of a salary range in a work schedule

**Action:** Trainee to send an example work schedule to GOS/HR.

The GOS informed the group of the trust wide junior doctors experience survey currently in progress. The response rate has been good with over 100 responses so far. The GOS encouraged trainees to participate

**Action**: GOS to forward the Junior Doctor’s Experience survey link

**4. Feedback from Trainees**

Good feedback on GOS website. There was confusion about ‘Info to follow’ on the website but this meant that the GOS was working on the answer.

The GOS had received communications from a number of trainees, informing her that operational rotas, had not been issued in a timely way. The GOS encouraged all trainees in this position to contact her.

The group discussed the problems trainees encountered in contacting department prior to starting, to arrange leave etc. The GOS has proposed generic email addresses to be created for department rota coordinators and this email address can be added into the generic work schedules. The group supported this initiative.

**Action**: GOS to proceed with generic email initiative for rota coordinators

Genetics representative highlighted the concerns of trainees in a small department regarding exception reporting, where trainees are very identifiable. The GOS acknowledged the difficulties, these have been overcome in small departments where exception reporting is encouraged by supervisors. Lack of familiarity in the system by supervisors can result in a deterrent culture. The GOS offered to meet with Genetics department to support them in implementing the new process and educate supervisors. This was considered useful.

The DME emphasised that if trainees were encountering difficulties with exception reporting and felt they were being discouraged that the local faculty educational leads should be informed, and play a major part in resolution of the situation in addition to the GOS

**Action**: GOS will meet with genetics department to discuss reporting process

**DATE OF NEXT MEETINGS:**

* 26th March 2018 15:00pm – 17:00pm
* 4th June 2018 15:00pm – 17:00pm
* 17th Sept 2018 15:00pm – 17:00pm
* 10th Dec 2018 15:00pm – 17:00pm