

MANCHESTER UNIVERSITY NHS FOUNDATION TRUST

HUMAN RESOURCES SCRUTINY COMMITTEE

Report of:	Miss Toli Onon, Joint Group Medical Director
Paper prepared by:	Karen Fentem, Guardian of Safe Working
Date of paper:	December 2021
Subject:	Quarterly report from Guardian of Safe Working (Quarter 2, July – Sept 2021)
Purpose of Report:	<p>Indicate which by ✓</p> <ul style="list-style-type: none"> • Information to note ✓ • Support • Accept • Resolution • Approval • Ratify
Consideration against the Trust's Vision & Values and Key Strategic Aims:	Staff satisfaction and reputation of the Trust
Recommendations	That the HR Scrutiny Committee notes the content of this report
Contact:	<u>Name:</u> Karen Fentem, Guardian of Safe Working <u>Tel:</u> 07974 609040

Report from the Guardian of Safe Working Period July - September 2021

1. Introduction

This is the second quarterly report for the year 2021/22, based on a national template, by the Guardian of Safe Working (GoSW). The GoSW's primary responsibility is to act as the champion of safe working hours for doctors and dentists in training and provide assurance to the Trust that they are safely rostered and that their working hours are compliant with the 2016 Terms and Conditions of Service. The process of exception reporting provides data on their working hours and can be used to record safety concerns related to these and rota gaps. In addition, it can identify missed training opportunities.

The number of exception reports received and closed for the period July 2018 – September 2021 is depicted in Appendix 1. Additionally, the number of exception reports submitted in Quarter 2 against the same quarter in 2019 and 2020 is shown in Appendix 2.

2. High Level Data (as at 14 October 2021)

Number of established training posts:	
• North Manchester General Hospital	222
• Oxford Road Campus	609
• Wythenshawe, Trafford, Withington and Altrincham	382
Total number of established training posts	1213
Total number of doctors/dentists in training on 2016 TCS	1164
Total number of Less than Full-Time doctors/dentists in training	211
Total number of locally employed junior doctors	220
Amount of time available for the Guardian to do the role per week	26 hrs
Admin support provided to the Guardian per week	22.5 hrs
Amount of job planned time for educational supervisors	0.25 PA

3. Exception Reports – Quarter 2 (July – September 2021)

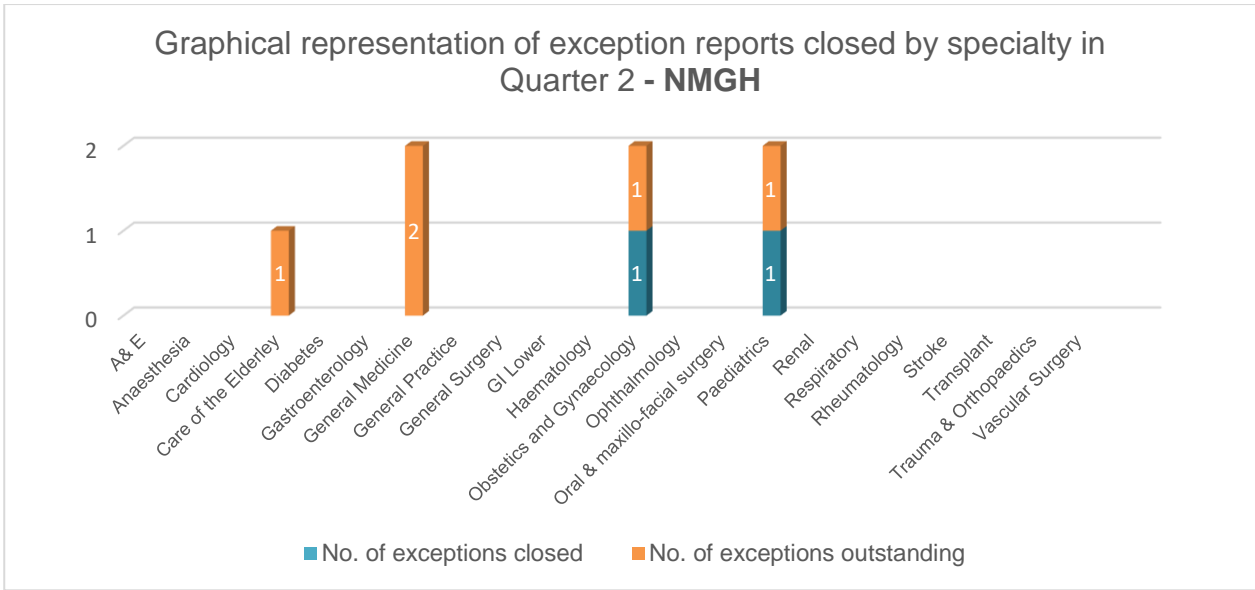
Please note the data presented in this report was extracted on 14 October 2021 from the exception reporting systems Allocate HealthMedics System for ORC and WTWA and the Doctors Rostering System for NMGH.

Total number of exception reports received	96
Number relating to hours of working	66
Number relating to educational opportunities	22
Number relating to service support available to the doctor	6
Number relating to pattern of work	2
Total number work schedule reviews	4

For each subsection 3.1 to 3.9, the data are presented with a short explanation to provide context, interpretation, and conclusions. The overall summary is presented in section 5.

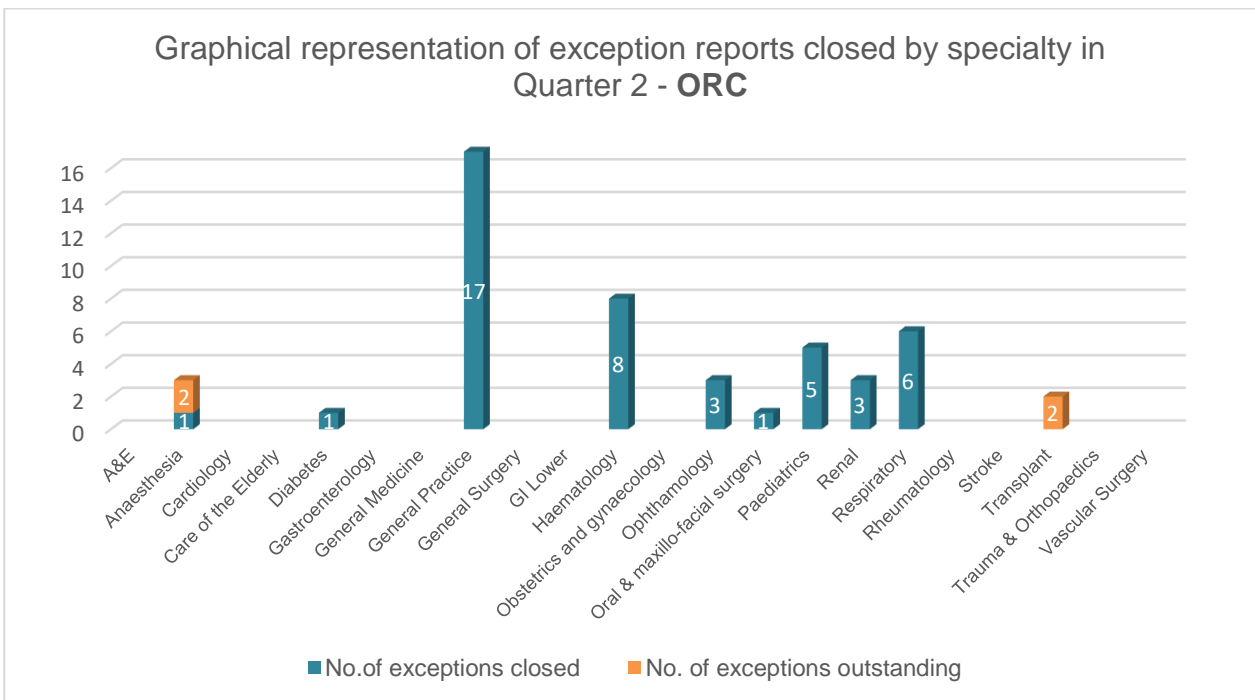
3.1 Exception Reports by Specialty						
Specialty	No. of exceptions raised in Quarter 2			No. of exceptions carried over from Quarter 1	No. of exceptions closed	No. of exceptions outstanding ¹
	NMGH	ORC	WTWA			
A&E	-	-	1	-	-	1
Anaesthesia	-	3	-	-	1	2
Cardiology	-	-	4	-	4	-
Care of the Elderly	1	-	1	3	4	1
Diabetes	-	1	8	-	4	5
Gastroenterology	-	-	6	1	6	1
General Medicine	2	-	-	-	-	2
General Practice	-	5	-	12	17	-
General Surgery	-	-	1	-	-	1
GI Lower	-	-	10	-	10	-
Haematology	-	8	-	-	8	-
Obstetrics and gynaecology	1	-	-	1	1	1
Ophthalmology	-	2	-	1	3	-
Oral & maxillo-facial surgery	-	1	-	-	1	-
Paediatrics	2	3	-	2	6	1
Renal	-	3	-	-	3	-
Respiratory	-	6	2	-	8	-
Rheumatology	-	-	10	1	11	-
Stroke	-	-	1	-	-	1
Transplant	-	2	-	-	-	2
Trauma & Orthopaedics	-	-	5	-	5	-
Vascular Surgery	-	7	-	-	7	-
Total	6	41	49	21	99	18

¹ Exception reports should be reviewed by the Educational Supervisor within 7 days of submission; where these timescales are not met the GoSW will send a reminder to the Educational Supervisor. Any exception reports that remain outstanding will be escalated to the relevant Clinical Director as detailed in Appendix 3 – the Trust’s Escalation Process for Exception Reports



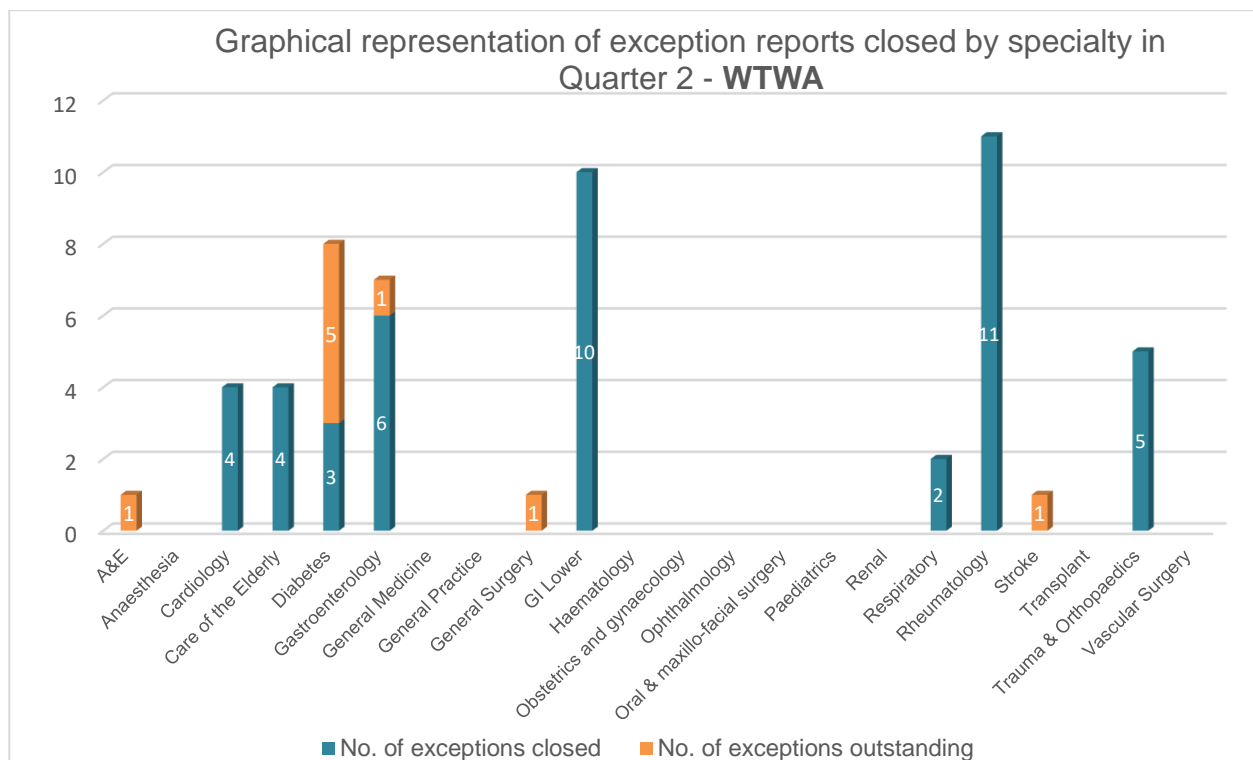
3.1.1 Once again in this Quarter, the number of exception reports at NMGH were very low compared to the other hospitals sites, with a total of 6 exception reports submitted. Of these, 2 exceptions were raised by an FY2 doctor in General Medicine, who stayed late on two occasions due to the volume of work caused by low staffing levels. Volume of work was also cited as the reason for the exception reports in Obstetrics and Gynaecology and Paediatrics. These doctors have now received payment for the additional hours worked.

3.1.2 Two exception reports were categorised as service support; the one in Paediatrics was because the doctor had not received their work schedule within the first four weeks of starting their placement and the second was in Care of the Elderly, where the bleep was not working and this delayed handover by an hour.



3.1.3 The number of exception reports received in Quarter 2 at ORC increased by 10 this Quarter to a total of 41, the reasons for the majority of these were low staffing levels and high workload.

- 3.1.4 Eight reports were submitted by an ST3 in Children’s Haematology due to low staffing levels and ward pressures. This was escalated to the Associate Medical Director and Clinical Director and assurances were given that plans were underway to recruit additional clinical fellows to fill the rota gaps.
- 3.1.5 Seven exception reports were received in Vascular Surgery and 6 in Respiratory Medicine due to high workload and short staffing on the ward, respectively. High workload was also cited by an FY2 in General Practice on their 5 reports, the outcome of which was a reduction in patient appointments and payment for the additional hours worked.
- 3.1.6 It is positive to note that Cardiology and Gastroenterology at ORC have not received any exception reports this Quarter, which is a significant improvement on previous quarters.



- 3.1.7 Rheumatology and GI Lower Surgery at WTWA both received 10 exception reports during this Quarter. All 10 reports in Rheumatology were from the same doctor who raised concerns about consultants not being present at clinics and only available remotely. These concerns were discussed with the trainee and an explanation given that it was because of consultant sickness and self-isolation. The 10 reports in GI Lower Surgery were because of workload pressures resulting in the doctors working additional hours or not being able to take their rest breaks. Time off in lieu was granted to these doctors as compensation.
- 3.1.8 Eight reports were received in Diabetes due to short staffing. The number of exception reports in Gastroenterology has reduced slightly this Quarter with 6 reports, compared to 7 reports in Q1. Recently, the Director of Medical Education and the GoSW met with the Gastroenterology clinical leadership team to discuss the recruitment plans for additional staff and it was noted that appointments had not been made as yet but they were in the pipeline.

3.2 Exception Reports by Specialty by Year

Specialty	Average no. of exception reports in Quarter 2	No. of exception reports submitted in Quarter 2			Trend against average for this Quarter
		2019/20	2020/21*	2021/22	
Accident and emergency	2	4	-	1	Downward
Acute Internal Medicine	1	4	-	-	Downward
Acute Medicine	-	-	-	-	Aligned
Anaesthetics	1	-	-	3	Upward
Cardiology	4	8	-	4	Aligned
Cardio-thoracic surgery	3	-	8	-	Downward
Care of the Elderly	7	8	10	2	Downward
Child & adolescent psychiatry	1	3	-	-	Downward
Colorectal surgery	8	18	6	-	Downward
Diabetes & Endocrinology	4	2	1	9	Upward
Gastroenterology	26	59	13	6	Downward
General medicine	7	20	-	2	Downward
General practice	2	-	-	5	Upward
General surgery	4	-	-	11	Upward
Haematology	3	-	-	8	Downward
Hepato-Pancreato-Biliary (HPB)	7	13	7	-	Downward
Medical microbiology and virology	1	-	2	-	Downward
Obstetrics and gynaecology	2	5	-	1	Downward
Ophthalmology	1	1	-	2	Upward
Oral & maxillo-facial surgery	-	-	-	1	Upward
Paediatrics	10	26	-	5	Downward
Renal Medicine	5	7	4	3	Downward
Respiratory Medicine	7	11	3	8	Upward
Rheumatology	4	2	-	10	Upward
Stroke	1	1	2	1	Aligned
Transplant Surgery	1	-	1	2	Upward
Trauma & Orthopaedic Surgery	2	1	-	5	Upward
Vascular Surgery	5	3	4	7	Upward
Total		196	61	96	

* Fewer exception reports were submitted in Q2 2020/21 due to COVID-19

3.2.1 During Quarter 2, 11 specialities received higher than average numbers of exception reports; 3 specialties were aligned to the average; and 14 specialties received less than average. As can be seen in Appendices 1 and 2 the number of exception reports do fluctuate on a monthly/quarterly basis however, it can be seen that there has been a significant downward trend in the number of exception reports being submitted compared to the 2019 data, particularly in light of the additional trainees who joined MFT in April from NMGH.

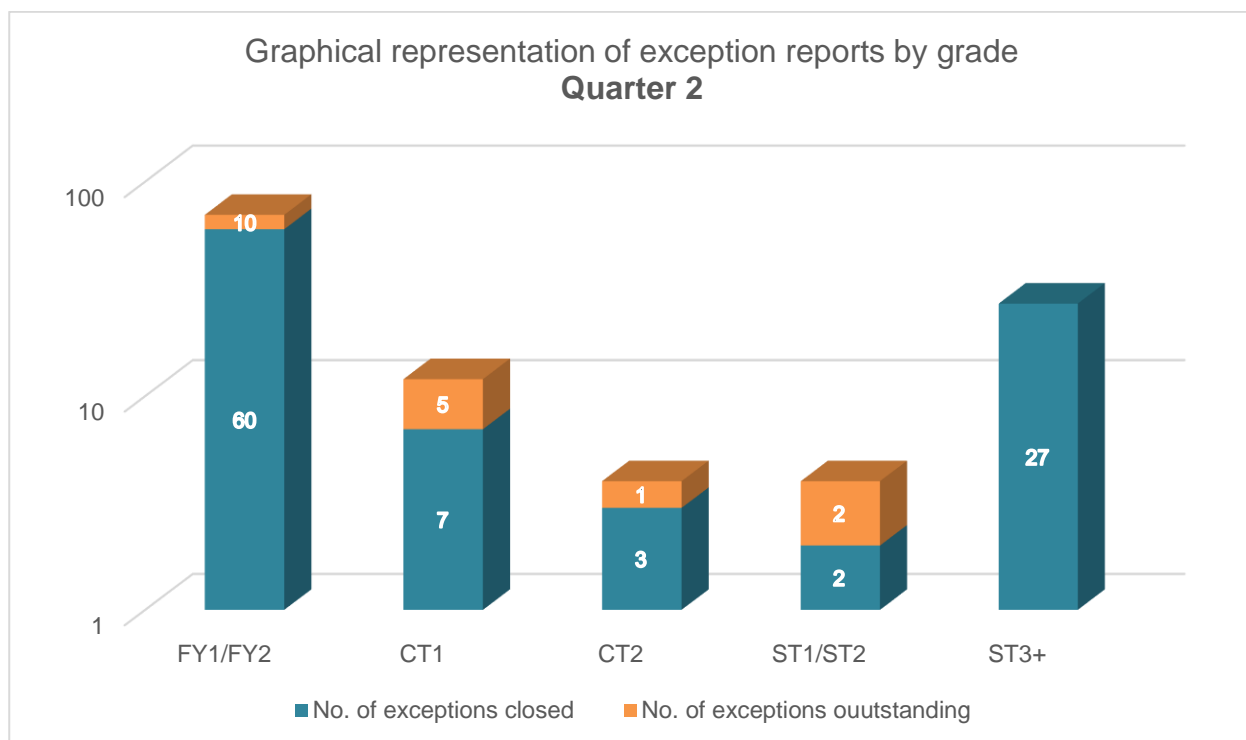
3.2.2 The BMA has also acknowledged under-reporting is an issue nationally and an exception reporting campaign is underway to encourage junior doctors to report. It is important that junior doctors recognise the value of reporting, feel empowered to report and have confidence that their reports are actioned; however, the possibility that a downturn in the number of exception reports reflects improvements in safe working, should not be discounted.

3.2.3 An exception reporting survey will be undertaken in Quarter 3 and this will provide insights into the reasons why junior doctors are not exception reporting as much as they did in previous years.

3.3 Exception Reports by Grade

Grade	No. of exceptions carried over from last report	No. of exceptions raised in this quarter	No. of exceptions closed	No. of exceptions outstanding
FY1 / FY2	16	54	60	10
Locally Employed Doctor	-	-	-	-
CT1	-	12	7	5
CT2	-	4	3	1
ST1 / ST2	1	3	2	2
ST3 +	4	23	27	-
Total	21	96	99	18

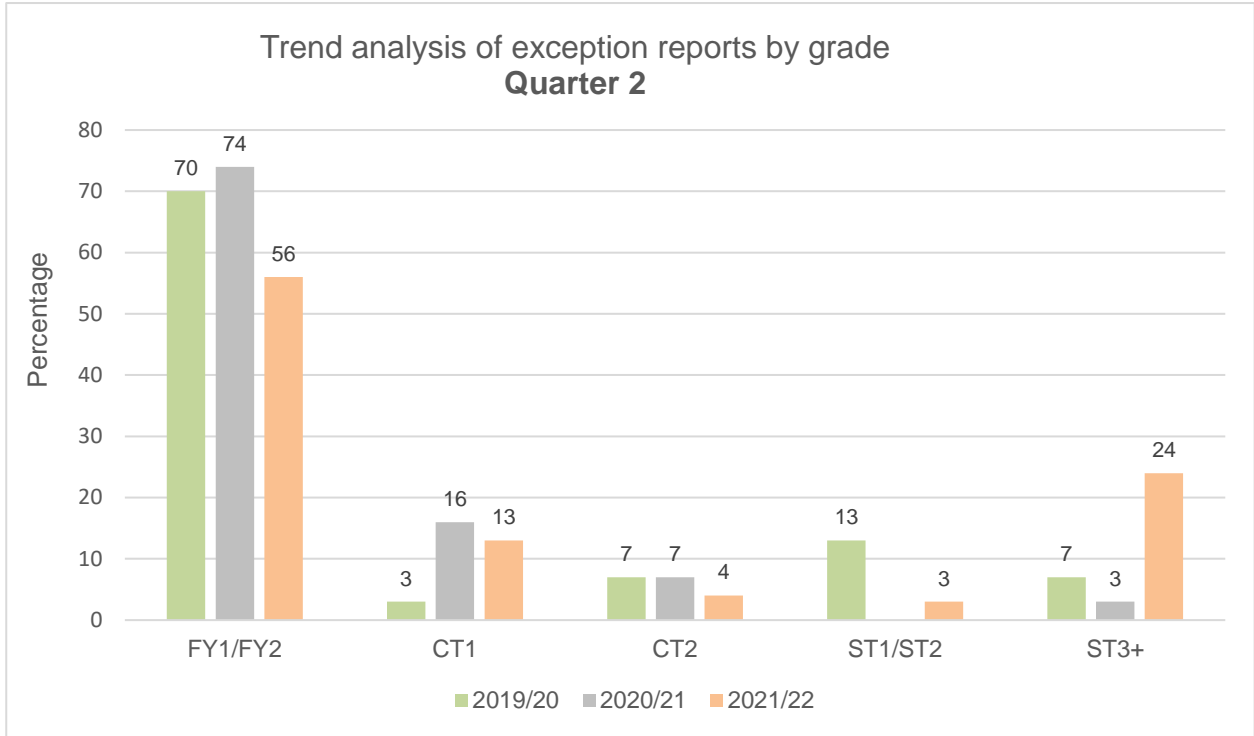
Graphical representation of exception reports by grade
Quarter 2



3.3.1 The number and timeliness within which exception reports have been closed has remained relatively constant during this Quarter. It can be seen in table 3.3 that 21 exception reports were carried over from Quarter 1 into Quarter 2, with 18 exception reports outstanding at the time of this report.

3.4 Exception Reports by Grade by Year

Grade	No. of exception reports submitted in Quarter 2					
	2019/20		2020/21		2021/22	
FY1 / FY2	137	70%	45	74%	54	56%
Locally Employed Doctor	-	-	-	-	-	-
CT1	6	3%	10	16%	12	13%
CT2	14	7%	4	7%	4	4%
ST1 / ST2	25	13%	-	-	3	3%
ST3 +	14	7%	2	3%	23	24%
Total	196		61		96	



3.4.1 In line with previous GoSW reports, most exception reports (56%) were submitted by foundation doctors, however, during this Quarter there has been a significant increase in the number of reports from senior doctors at ST3+ (24%) which is encouraging as this indicates that the culture of exception reporting embedded in foundation training is being taken forward as doctors' training progresses. However, the number of higher trainees who exception report is still extremely low.

3.4.2 It should also be noted that 220 locally employed doctors (LED) now have the right to exception report, however, no reports were received from this cohort during this Quarter. LEDs were invited to an information session about their new contract and how to exception reporting in September and this will be repeated every few months.

3.5 Exception Reports by Rota

Rota	No. of exceptions raised in Quarter 2			No. of exceptions carried over from Quarter 1	No. of exceptions closed	No. of exceptions outstanding
	NMGH	ORC	WTWA			
FY2 GP Placement		5		12	17	
Gen Med FY1 Live Aug 21	1					1
JM NMGH Level 1 Obs & Gynae Compliant Aug 2021	1					1
LTFT ** RMCH COMBINED Senior Gen/Tert		2		2	4	
LTFT ** RMCH PICU (ICM Trainees, 6 Slot)		1			1	
MRI - OMFS DCT - September 2020		1			1	
MRI General Medicine F1 - 2021		7		1	8	
MRI General Medicine IMT/JCF 2 - 2021		1			1	
MRI General Surgery FY1		9			7	2
MRI Renal Medicine Hybrid August 2020		2			2	
NMGH Gen Med RMO2 June 2020 Live	2					2
NMGH Paediatrics	1				1	
North Manchester General Paeds SHO grade	1					1
ORC Anaesthesia Gen Aug 21 CT&ST 1-2		2			1	1
ORC Anesthesia Gen CT1-2		1				
REH Ophthalmology, 1st OC 2021		2		1	3	
RMCH Haematology New 2019 junior		7			7	
RMCH Haematology, Junior 2021		1			1	
St Marys, O&G, Junior - 2021				1	1	
Trafford & Psychiatry General Medicine FY1 - 2021			2		1	1
WTWA A&E Jnr Aug 20			1			1
WTWA CT Surgery Junior			7		7	
WTWA Gen Surg Fy1			7		6	1
WTWA General Medicine Foundation			5		5	
WTWA Rheumatology ST3			10	1	11	
WTWA T&O Jnr April 2021 - inc TGH			1		1	
WTWA T&O Jnr April 2021 - inc TGH Fy2 pay			1		1	
WTWA Trafford Gen Med FY1 - August				3	3	
WTWA Wythenshawe Gen Med Junior			15		9	6
Total	6	41	49	21	99	18

3.5.1 The highest number of exception reports (15) were received on the WTWA Wythenshawe General Medicine Junior rota for low staffing levels. The trainees were working in the following sub-specialties:

- Diabetes - 7
- Gastroenterology - 6
- Respiratory - 2

3.5.2 Ten exception reports were submitted by one trainee on the WTWA Rheumatology ST3 rota, for missed educational opportunities.

3.5.3 Nine exception reports were submitted by two trainees on the MRI General Surgery FY1 rota, 7 of which were in Vascular Surgery and 2 in Transplant Surgery for high workload and low staffing levels.

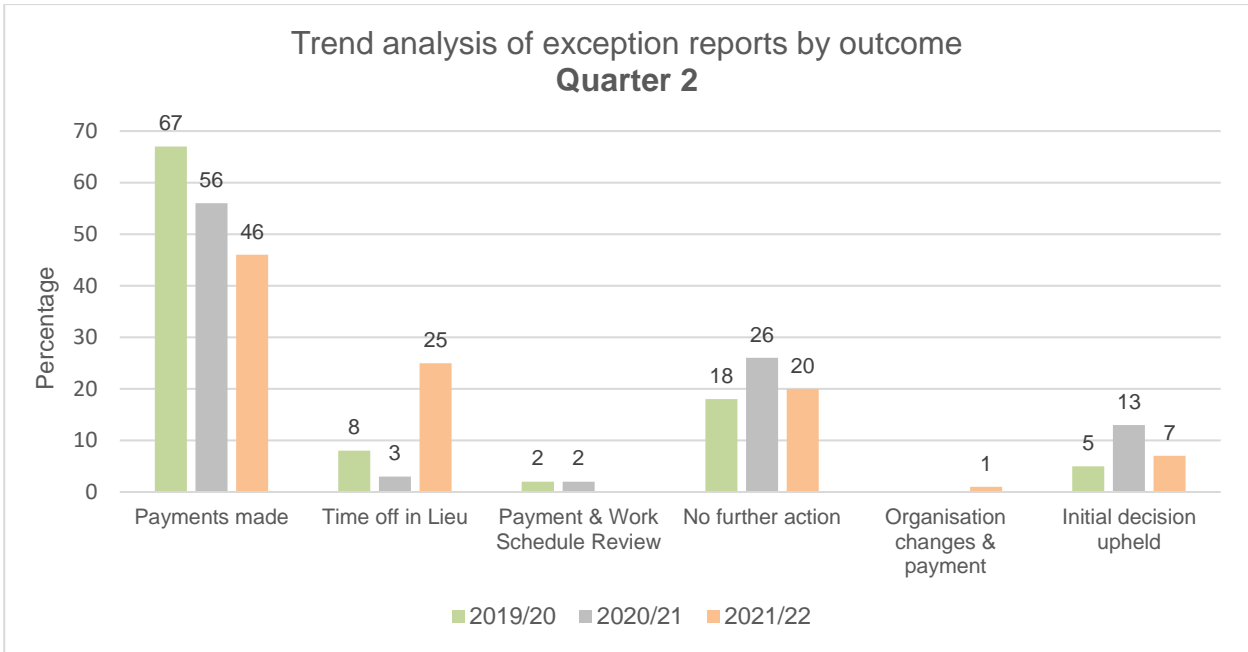
3.6 Work Schedule Reviews

3.6.1 A work schedule review is undertaken when either a doctor is dissatisfied with the outcome of the initial review meeting or the concerns raised require an individual's (or all the trainees working on a rota) work schedule to be reviewed. The work schedule review process incorporates three levels of escalation and all four work schedule reviews undertaken during this period have been at Level 1. Further details are included in the table below:

Rota	Site	Specialty	Grade	Reason	Outcome
MRI Renal Medicine Hybrid August 2020	ORC	Renal	CT1	workload	Time off in lieu
MRI General Medicine F1 - 2021	ORC	Respiratory	FY1	staffing	Payment
WTWA Wythenshawe Gen Med Junior	WTWA	Gastroenterology	FY1	workload	Payment
WTWA Rheumatology ST3	WTWA	Rheumatology	ST5	lack of support	Concerns noted

3.7 Exception Reports by Outcome by Year

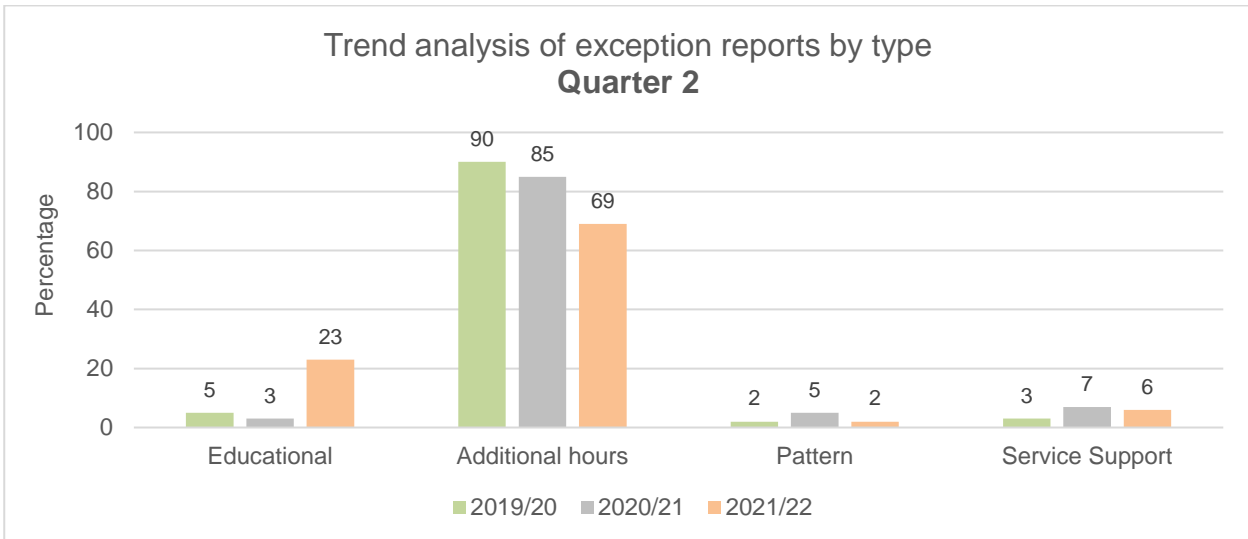
Outcomes	No. of exception reports closed in Quarter 2					
	2019/20		2020/21		2021/22	
Payment made	131	67%	34	56%	46	46%
Time off in Lieu	16	8%	2	3%	25	25%
Payment & Work Schedule Review	3	2%	1	2%	-	-
No further action	35	18%	16	26%	20	20%
Organisation Changes & Payment	1	-	-	-	1	1%
Initial Decision Upheld	10	5%	8	13%	7	7%
Total	196		61		99	



3.7.1 In 46% of cases, payment for the additional hours worked has been agreed, with 25% being granted time off in lieu. There has been a welcome increase in the 'time off in lieu' outcome this quarter compared to 2019/20 and 2020/21 as this ensures that the trainees are not working excessive hours and getting adequate rest.

3.8 Exception Reports by Type by Year

Type	No. of exception reports submitted in Quarter 2					
	2019/20		2020/21		2021/22	
Educational	9	5%	2	3%	22	23%
Additional hours	177	90%	52	85%	66	69%
Pattern	3	2%	3	5%	2	2%
Service Support	7	3%	4	7%	6	6%
Total	196		61		96	

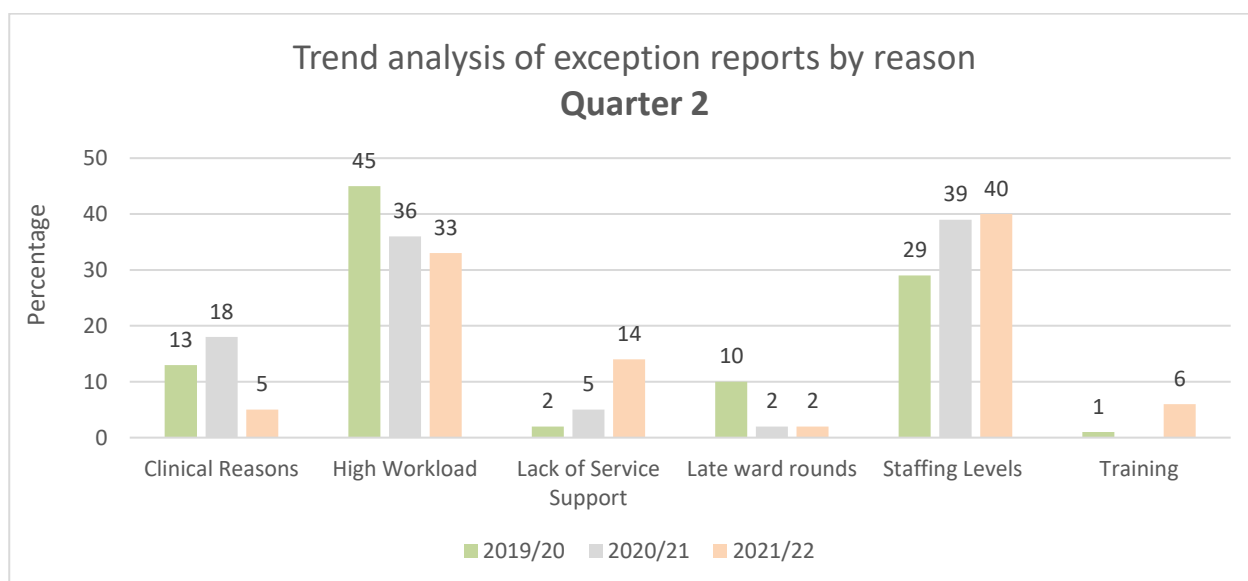


3.8.1 Consistently over the past three years the main reason for exception reporting has been trainees working above their contracted hours due to high workload and/or low staffing levels. However, it can be seen in table 3.8 that there has been a downward trend in the overall percentage of reports for additional hours, from 90% in 2019/20 to 69% in 2021/22.

3.8.2 Conversely there has been a marked increase in the number of exception reports submitted for educational reasons this Quarter (n=22). These were split across WTWA (n=14) and ORC (n=8). Nine reports were submitted from one doctor in Rheumatology at WTWA who was concerned about consultant presence in clinic; and the other 5 reports at WTWA were because of low staffing levels resulting in doctors not being able to attend training or covering gaps on the rota outside their sub-specialty. The ORC reports also related to low staffing levels and 3 reports were for the late arrival of the speaker at an Anaesthetics teaching session.

3.8.3 6% of exception reports were for service support reasons, where there were known gaps on the rota due to staffing shortages which had not been filled.

3.9 Reasons for Exception Reports by Year						
Reason	No. of exception reports submitted in Quarter 2					
	2019/20		2020/21		2021/22	
Clinical Reasons	25	13%	11	18%	5	5%
High Workload	89	45%	22	36%	32	33%
Lack of Service Support ²	4	2%	3	5%	13	14%
Late Ward Rounds	19	10%	1	2%	2	2%
Staffing Levels	57	29%	24	39%	38	40%
Training	2	1%	-	-	6	6%
Total	196		61		96	



² Lack of service support includes known gaps on the rota, theatre lists over-running, work schedules not being provided on time and lack of on-site supervision in clinic

3.9.1 In this quarter, the primary reasons noted for exception reports were low staffing levels (40%), high workload (33%), lack of service support (14%), training (6%), and clinical reasons (5%).

3.9.2 Over the past three years, there has been a slight decline in exception reports due to high workload with a corresponding increase in those due to low staffing levels.

3.10 Breaches that Attract a Financial Penalty

3.10.1 Fines are levied when working hours breach one or more of the following situations:

- i. The 48 hours average working week.
- ii. Maximum 72 hours worked within any consecutive period of 168 hours.
- iii. Minimum of 11 hours continuous rest between rostered shifts.
- iv. Where meal breaks are missed on more than 25% of occasions.
- v. The minimum non-residential on call overnight continuous rest of 5 hours between 22.00 – 07.00 hours.
- vi. The minimum 8 hours total rest per 24 hours non-resident on call shift
- vii. The maximum 13 hours shift length
- viii. The minimum 11 hours rest between resident shifts

3.10.2 A proportion of the fine, apart from fines for breaks where payment is 100%, is paid to the GoSW, as specified in the 2016 Terms & Conditions of Service (TCS) (see penalty rates and fines below). The TCS also specifies that the Junior Doctors’ Forum is the body that decides how accrued monies are spent within the framework identified within the TCS.

3.10.3 Penalty Rates and Fines

i) Penalty rates and fines for hours worked at the basic hourly rate.

Nodal Point	Total hourly (x4) figure	Hourly penalty rate (£), paid to the doctor	Hourly penalty rate (£), paid to the guardian of safe working
1	63.56	23.83	39.73
2	73.56	27.59	45.97
3	87.04	32.64	54.40
4	110.32	41.38	68.94

ii) Penalty rates and fines for hours worked at the enhanced hourly rate.

Nodal Point	Total hourly (x4) figure	Hourly penalty rate (£), paid to the doctor	Hourly penalty rate (£), paid to the guardian of safe working
1	87.08	32.64	54.44
2	100.78	37.79	62.99
3	119.25	44.72	74.53
4	151.14	56.68	94.46

3.10.4 Penalty rates have been calculated using the 2019 NHSI locum rates. These remain unchanged from the 2018/19 rates as set out in pay circular 3/2018.

3.10.5 During this reporting period one fines was levied against General Paediatrics in the Royal Manchester Children's Hospital where a doctor worked longer than the maximum 13 hours shift because of staff shortages. The total fine levied was £422.45, of which £160.30 was paid to the doctor with £262.15 credited to the GoSW fund.

3.10.6 The GoSW fund currently stands at £2,337.15. The Junior Doctors' Forum will decide towards the end of the financial year how to spend the monies to improve the working lives of junior doctors.

4. Establishment Figures and Vacancies (Quarter 2)

Please note that the data below relates only to doctors in training and as such only provides part of the vacancy picture across the Trust. Use of the Allocate software for rosters across MFT will also enable the number of vacancies for non-training grade doctors to be captured and included in this report once full roll out of the software has been undertaken, which is estimated to be completed by March 2022.

The establishment data has been updated for this quarter using Health Education England's Training Information System (TIS) for all training posts which are funded under the Learning Development Agreement, with the addition of the Trust's Foundation training posts. The number of funded training posts has increased by 117 (from 1,096 to 1,213) this Quarter. Also included in table 4.4 is the number of Less than Full-Time (LTFT) trainees.

4.1 NMGH Establishment & Vacancies	Academic	Academic	Foundation	Foundation	GP	Higher	Lower	Grand	Vacancies			
	Clinical Fellow	Clinical Lecturer	1	2	Specialty Training	Training (St3+)	Training (CT/ST 1/2)		Total	Jul	Aug	Sep
North Manchester General Hospital (ROA66)												
Acute Care Common Stem - Acute Medicine							1	1				
Acute Care Common Stem - Intensive Care Medicine							1	1				
Acute internal medicine						1		1				
Anaesthetics	1					8		9	2			
Cardiology	1							1				
Clinical Radiology						8	1	9		1	2	
Core anaesthetics training							6	6				
Core surgical training							8	8	4	2	4	
Dental Core Training							7	7				
Emergency Medicine					6			6				
Endocrinology and Diabetes Mellitus						1		1				
Foundation			36	31				67				
General (internal) Medicine					4			4				
General Surgery						4		4	2	1	2	
Genito-urinary Medicine						1		1				
Geriatric Medicine						2		2				
Infectious Diseases						10		10				
Intensive Care Medicine						4		4	1			
Internal Medicine Stage One							25	25	3	2	3	
Obstetrics and gynaecology					7	10	4	21	1	1	2	
Oral and maxillofacial surgery						8		8	2	1	2	
Paediatrics					13	3	3	19				
Respiratory Medicine		1				3		4				
Rheumatology						1		1				
Trauma and Orthopaedic Surgery						2		2				
Grand Total	2	1	36	31	30	66	56	222	15	8	15	

4.2 ORC Establishment & Vacancies	Academic Clinical Fellow	Academic Clinical Lecturer	Core Training	Foundation 1	Foundation 2	GP Specialty Training	Higher Training (St3+)	Lower Training (St1/2)	Grand Total	Vacancies		
										Jul	Aug	Sep
Manchester Royal Eye Hospital (ROA04)	4	1			2		17	2	26	1		
Foundation					2				2			
Ophthalmology	4	1					17	2	24	1		
Manchester Royal Infirmary (ROA02)	7	7	3	40	40	12	153	77	339	11	10	16
Acute Care Common Stem - Acute Medicine								4	4			
Acute Care Common Stem - Anaesthetics								5	5			
Acute Care Common Stem - Emergency Medicine	1							3	4			
Acute Care Common Stem - Intensive Care Medicine								3	3			
Acute internal medicine						1	2		3		2	2
Anaesthetics		1					23		24			
Audio Vestibular Medicine							2		2			
Cardiology	1	1					7		9			
Cardiothoracic surgery							6		6	1	3	3
Chemical Pathology							1		1			
Clinical Radiology							11	1	12			
Core anaesthetics training								5	5			
Core medical Training	1								1			
Core surgical training								18	18	1	1	1
Dental Core Training								7	7			
Emergency Medicine		1				3	7		11			
Endocrinology and Diabetes Mellitus		1				1	3		5			
Foundation				40	40				80			
Gastroenterology		1					3		4			
General Surgery							10		10	1	1	1
Genito-urinary Medicine							4		4	2		
Geriatric Medicine						4	2		6			
Haematology							6		6			
Histopathology							5	8	13	3	1	3
Immunology							1		1			
Intensive Care Medicine							16		16	1		2
Internal Medicine Stage One	3		3					23	29		1	1
Medical Microbiology							4		4			
Nuclear Medicine							2		2			
Oral and maxillofacial surgery							8		8			1
Otolaryngology							3		3			
Paediatric emergency medicine						2			2			
Renal Medicine	1	1					8		10	1		
Respiratory Medicine						1	2		3			
Rheumatology		1					4		5		1	1
Trauma and Orthopaedic Surgery							2		2			
Urology							4		4			
Vascular Surgery							7		7	1		1

4.2 ORC Establishment & Vacancies (cont'd)	Academic Clinical Fellow	Academic Clinical Lecturer	Core Training	Foundation 1	Foundation 2	GP Specialty Training	Higher Training (St3+)	Lower Training (St1/2)	Grand Total	Vacancies		
										Jul	Aug	Sep
MANCHESTER UNIVERSITY HOSPITAL NHS FT (HQ) (ROA01)	2						11	7	20	1		
Child and adolescent psychiatry	1						11		12	1		
Core psychiatry training	1							7	8			
ROYAL MANCHESTER CHILDREN'S HOSPITAL (ROA03)	5	2			4	4	86	30	131	6	3	3
Anaesthetics							16		16	1		
Chemical Pathology							1		1			
Clinical Radiology							4		4			
Core surgical training								3	3			
Emergency Medicine	1						11		12			
Foundation					4				4			
Haematology							3		3			
Neurosurgery	1	1					2		4	2	1	1
Otolaryngology							1		1			
Paediatric and Perinatal Pathology		1					2		3			
Paediatric Surgery							8		8	1		2
Paediatrics	2					4	32	27	65	1		
Plastic Surgery	1						1		2		2	
Trauma and Orthopaedic Surgery							5		5	1		
ST MARY'S HOSPITAL (ROA05)	3	7			2	10	26	12	60		2	2
Clinical Genetics	1	1					5		7			
Foundation					2				2			
Obstetrics and gynaecology	1	6				10	15	5	37		2	2
Paediatrics	1						6	7	14			
University Dental Hospital of Manchester (ROA06)	6	3					14	10	33			
Dental Core Training	1							10	11			
Dental Public Health	1								1			
Oral Medicine							1		1			
Oral Pathology	1								1			
Oral Surgery	1	1					1		3			
Orthodontics							1		1			
Paediatric Dentistry		1					5		6			
Prosthodontics		1							1			
Restorative Dentistry	1						6		7			
Special Care Dentistry	1								1			
Grand Total	27	20	3	40	48	26	307	138	609	19	15	21

4.3 WTWA Establishment & Vacancies	Academic Clinical Fellow	Academic Clinical Lecturer	Core Training	Foundation 1	Foundation 2	GP Specialty Training	Higher Training (St3+)	Lower Training (St1/2)	Grand Total	Vacancies		
										Jul	Aug	Sep
TRAFFORD GENERAL HOSPITAL (ROA09)	3			9		2	10	4	28		1	1
Acute internal medicine							2		2			
Emergency Medicine						1			1			
Endocrinology and Diabetes Mellitus							1		1		1	1
Foundation				9					6			
General (internal) Medicine	1					1			2			
Geriatric Medicine							2		2			
Internal Medicine Stage One	2							4	6			
Rehabilitation Medicine							2		2			
Respiratory Medicine							1		1			
Rheumatology							1		1			
Trauma and Orthopaedic Surgery							1		1			
WITHINGTON COMMUNITY HOSPITAL (ROA08)							2		2			
Genito-urinary Medicine							1		1			
Rehabilitation Medicine							1		1			
WYTHENSHAW HOSPITAL (ROA07)	10	5	5	36	36	24	161	75	352	19	11	12
Acute Care Common Stem - Acute Medicine								3	3			
Acute Care Common Stem - Anaesthetics								1	1			
Acute Care Common Stem - Emergency Medicine								4	4			
Acute Care Common Stem - Intensive Care Medicine								1	1			
Acute internal medicine							2		2			
Allergy							2		2		1	1
Anaesthetics	2						23		25			
Cardiology		1					6		7			
Cardiothoracic surgery		1					10		11			
Chemical Pathology							1		1			
Clinical Radiology							10	1	11			
Core anaesthetics training								7	7			
Core surgical training	1							17	18		1	1
Dental Core Training								5	5			
Emergency Medicine	1					5	10		16			
Endocrinology and Diabetes Mellitus						2	1		3			
Foundation				36	36				72			
Gastroenterology							3		3			
General (internal) Medicine	2								2			
General Surgery		1					7		8		1	
Geriatric Medicine						7	4		11			
Histopathology							4		4	2	1	1
Intensive Care Medicine							20		20	6	2	2
Internal Medicine Stage One	2		5					30	37	5	1	1
Medical Microbiology							1		1			
Obstetrics and gynaecology						5	8	3	16			
Oral and maxillofacial surgery							4		4			
Orthodontics							3		3			
Otolaryngology							2		2			
Paediatrics	1					5	7	3	16	1	1	
Plastic Surgery	1	1					14		16	4	2	4
Renal Medicine							1		1			
Respiratory Medicine							8		8			1
Rheumatology		1					2		3			
Trauma and Orthopaedic Surgery							4		4	1	1	1
Urology							4		4			
Grand Total	13	5	5	45	36	26	173	79	382	19	12	13

4.4 Less Than Full Time Trainees by Hospital & Specialty

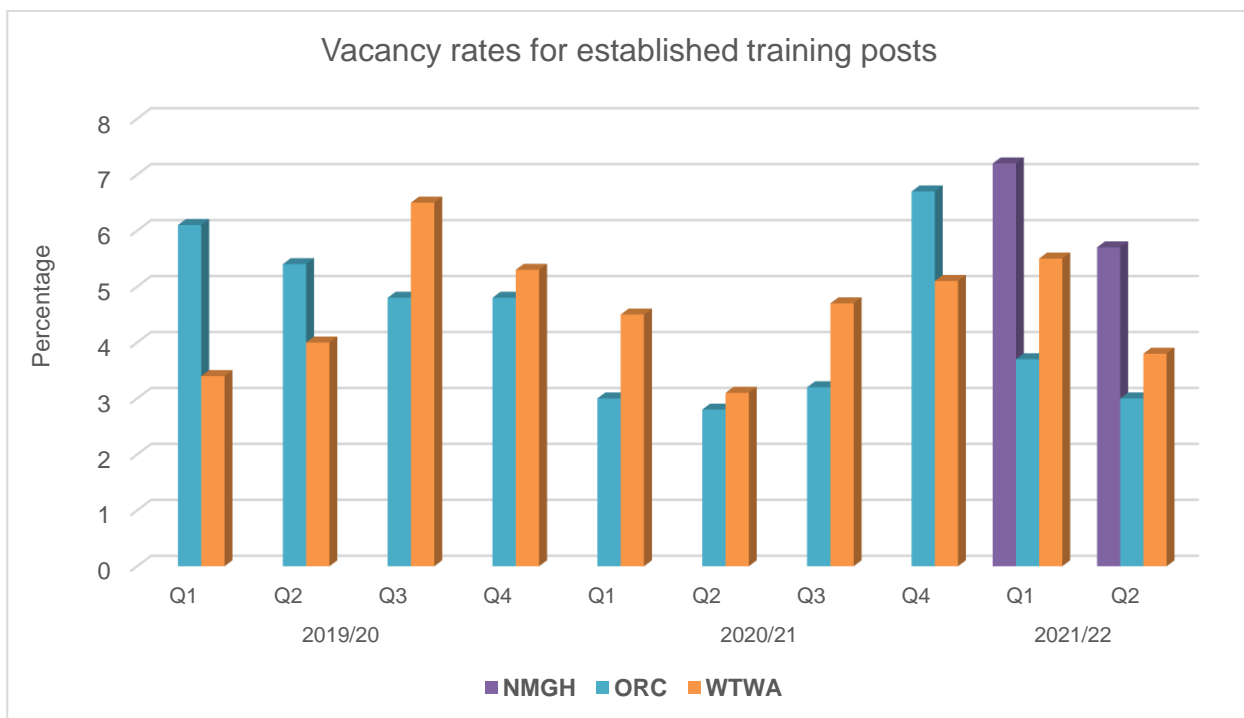
NMGH - LTFT trainees by Hospital & Specialty	
North Manchester General Hospital (ROA66)	
Acute Care Common Stem - Acute Medicine	
Acute Care Common Stem - Intensive Care Medicine	
Acute internal medicine	
Anaesthetics	2
Cardiology	
Clinical Radiology	1
Core anaesthetics training	
Core surgical training	
Dental Core Training	
Emergency Medicine	1
Endocrinology and Diabetes Mellitus	
Foundation	
General (internal) Medicine	
General Surgery	2
Genito-urinary Medicine	
Geriatric Medicine	1
Infectious Diseases	5
Intensive Care Medicine	
Internal Medicine Stage One	2
Obstetrics and gynaecology	7
Oral and maxillofacial surgery	
Paediatrics	3
Respiratory Medicine	2
Rheumatology	2
Trauma and Orthopaedic Surgery	
Grand Total	28

WTWA - LTFT trainees by Hospital & Specialty	
TRAFFORD GENERAL HOSPITAL (ROA09)	
Acute internal medicine	1
Emergency Medicine	
Endocrinology and Diabetes Mellitus	
Foundation	
General (internal) Medicine	
Geriatric Medicine	
Internal Medicine Stage One	
Rehabilitation Medicine	1
Respiratory Medicine	
Rheumatology	
Trauma and Orthopaedic Surgery	
WITHINGTON COMMUNITY HOSPITAL (ROA08)	
Genito-urinary Medicine	
Rehabilitation Medicine	
WYTHENSHAW HOSPITAL (ROA07)	
52	
Acute Care Common Stem - Acute Medicine	
Acute Care Common Stem - Anaesthetics	
Acute Care Common Stem - Emergency Medicine	
Acute Care Common Stem - Intensive Care Medicine	
Acute internal medicine	
Allergy	
Anaesthetics	8
Cardiology	1
Cardiothoracic surgery	1
Chemical Pathology	
Clinical Radiology	4
Core anaesthetics training	1
Core surgical training	
Dental Core Training	
Emergency Medicine	9
Endocrinology and Diabetes Mellitus	1
Foundation	
Gastroenterology	
General (internal) Medicine	
General Surgery	
Geriatric Medicine	2
Histopathology	1
Intensive Care Medicine	3
Internal Medicine Stage One	4
Medical Microbiology	
Obstetrics and gynaecology	5
Oral and maxillofacial surgery	
Orthodontics	
Otolaryngology	
Paediatrics	8
Plastic Surgery	1
Renal Medicine	1
Respiratory Medicine	2
Rheumatology	
Trauma and Orthopaedic Surgery	
Urology	
Grand Total	54

ORC - LTFT trainees by Hospital & Specialty	
Manchester Royal Eye Hospital (ROA04)	
Foundation	
Ophthalmology	3
Manchester Royal Infirmary (ROA02)	
37	
Acute Care Common Stem - Acute Medicine	
Acute Care Common Stem - Anaesthetics	
Acute Care Common Stem - Emergency Medicine	
Acute Care Common Stem - Intensive Care Medicine	
Acute internal medicine	
Anaesthetics	7
Audio Vestibular Medicine	
Cardiology	4
Cardiothoracic surgery	
Chemical Pathology	
Clinical Radiology	1
Core anaesthetics training	
Core medical Training	
Core surgical training	1
Dental Core Training	
Emergency Medicine	6
Endocrinology and Diabetes Mellitus	1
Foundation	
Gastroenterology	
General Surgery	2
Genito-urinary Medicine	
Geriatric Medicine	
Haematology	4
Histopathology	2
Immunology	
Intensive Care Medicine	3
Internal Medicine Stage One	1
Medical Microbiology	3
Nuclear Medicine	
Oral and maxillofacial surgery	
Otolaryngology	
Paediatric emergency medicine	1
Renal Medicine	
Respiratory Medicine	
Rheumatology	1
Trauma and Orthopaedic Surgery	
Urology	
Vascular Surgery	
MANCHESTER UNIVERSITY HOSPITAL NHS FT (HQ) (ROA01)	
Child and adolescent psychiatry	4
Core psychiatry training	3
ROYAL MANCHESTER CHILDREN'S HOSPITAL (ROA03)	
57	
Anaesthetics	8
Chemical Pathology	
Clinical Radiology	1
Core surgical training	1
Emergency Medicine	6
Foundation	
Haematology	2
Neurosurgery	
Otolaryngology	
Paediatric and Perinatal Pathology	
Paediatric Surgery	
Paediatrics	39
Plastic Surgery	
Trauma and Orthopaedic Surgery	
ST MARY'S HOSPITAL (ROA05)	
24	
Clinical Genetics	4
Foundation	
Obstetrics and gynaecology	14
Paediatrics	6
UNIVERSITY DENTAL HOSPITAL OF MANCHESTER (ROA06)	
1	
Dental Core Training	
Dental Public Health	
Oral Medicine	
Oral Pathology	
Oral Surgery	
Orthodontics	
Paediatric Dentistry	1
Prosthodontics	
Restorative Dentistry	
Special Care Dentistry	
Grand Total	129
Overall MFT Group Total	
	211

4.5 Vacancy Rate against Establishment

	2019/20		2020/21		2021/22		
	ORC	WTWA	ORC	WTWA	NMGH	ORC	WTWA
Quarter 1	6.1%	3.4%	3.0%	4.5%	7.2%	3.7%	5.5%
Quarter 2	5.4%	4.0%	2.8%	3.1%	5.7%	3.0%	3.8%
Quarter 3	4.8%	6.5%	3.2%	4.7%	-	-	-
Quarter 4	4.8%	5.3%	6.7%	5.1%	-	-	-



4.5.1. The start of the new training year in August has seen a reduction in the vacancy rates for established training posts at all sites. NMGH still has the highest vacancy rate of 5.7%, however, this has dropped by 1.5% from Quarter 1.

4.5.2 NMGH is carrying most vacancies in Core Surgical Training and Internal Medicine stage one, whereas at MRI most vacancies are in Histopathology and Cardiothoracic Surgery, along with Plastic Surgery at Wythenshawe.

4.5.3 Appendix 4 provides full details of the number of locum shifts/hours requested and paid for by department, grade, and reason during Quarter 2.

4.5.4 The total use of locums (as measured in hours paid) has more than doubled from 56,681 (Q1) to 118,117 (Q2). It was documented that 'vacancy' accounted for 80% of locum bookings (up from 62% in Q1), with 'COVID-19' accounting for 4% (down from 14% in Q1) and emergency department support shift accounting for 4% (down from 11% in Q1).

- 4.5.5 The increase in the number of bank shifts to cover vacancies correlates with the findings in section 3.9 where the reason for most exception reports was shown to be low staffing levels. Furthermore, 43% of the 118,117 hours worked by locums in Quarter 2, were at junior doctor grade (50,635 hours) some or all of which could reasonably be attributed to covering the vacancies shown in tables 4.1, 4.2 and 4.3 above. However, it should be noted that there is not a direct correlation between shifts requested and actual gaps in the rota as departments may put out a blanket request for shifts for the whole week and then amend the existing staff rota depending upon how many shifts can be filled by locums.
- 4.5.6 The vacancy rate for established training posts has decreased this Quarter and is an average of 4.2% for the Group. However, it should be noted that the vacancy rate does not include the partial whole-time equivalents (WTE) that are vacant because 17% of training posts (n=211) are currently filled by LTFT trainees (working from between 50% and 80% of a full time equivalent). This creates issues with gaps on rotas and increases the need for locum cover. The position is particularly challenging in the Children's and St Mary's Hospitals where LTFT trainees account for 44% and 40% of all trainees, respectively (see table 4.4 above).
- 4.5.7 Health Education England updated their Less Than Full Time Training scheme in May 2021, following successful pilots in Paediatrics, Obstetrics & Gynaecology and Emergency Medicine. Currently, all trainees are entitled to drop to 80% working, however, from next year they can go down to 50% if they wish. The other point about increasing LTFT is the feminisation of the medical workforce and this will often lead to periods of maternity leave and then a return to training on a LTFT basis. To address this, future trainee allocation needs to move away from headcount to WTE, over-recruitment to medical workforce posts should be considered and rotas re-designed to accommodate WTEs rather than full-time slots.

5. Overall Summary for Quarter 2

- 5.1 A total of 96 exception reports were submitted during this Quarter by 40 doctors, which is up from 38 reports in Q1. This demonstrates that a very small proportion of junior doctors (2.8%) are actively using the exception reporting system to raise concerns.
- 5.2 These 96 exception reports were split across the three sites as follows: NMGH – 6; ORC - 41; and WTWA – 49. This highlights that reporting levels are still significantly lower at NMGH than in other hospitals/MCS within the Group. The GoSW will continue to work with the Director of Medical Education, Educational Supervisors and the Junior Doctor Leaders Group to raise awareness and encourage doctors to exception report.
- 5.3 In line with previous reports, most exception reports (56%) were from foundation doctors. During this Quarter, there continues to be an encouraging number of exception reports (24%) submitted by ST3+ trainees. The GoSW will continue to encourage locally employed doctors to exception report, via regular information sessions.
- 5.4 The primary reason for exception reporting is where trainees are required to work beyond their contracted hours, and this has remained constant over the past 3 years. Low staffing levels were cited as the main reason for working additional hours and this correlates with the bank and agency data where there was a significant increase in the number of locum shifts worked to cover vacancies, however, on average 30% of these rota gaps remained unfilled. Added to this is the fact that 17% of all training posts are now filled by LTFT trainees.

- 5.5 The trend analysis of exception reports submitted by speciality for 2019/20, 2020/21 and 2021/22, shows that 11 specialties were above average in Quarter 2. This resulted in 4 work schedule reviews and one fine being levied. The GoSW will continue to monitor these specialties, however, from the reports submitted there are no overriding safety concerns.
- 5.6 The GoSW drop-in sessions at each of the hospital sites are scheduled until the end of December 2021, when an evaluation will be undertaken to assess how effective they have been and whether they should continue.
- 5.7 It was noted in the Quarter 1 report that there had been a significant reduction in the number of exception reports received in Cardiology, Gastroenterology and Respiratory Medicine at both ORC and WTWA, when compared to the data for the previous three quarters. In Quarter 2, submission rates have remained encouragingly low and therefore it is reasonable to conclude that the actions taken by the departments to address the previous concerns have been successful.

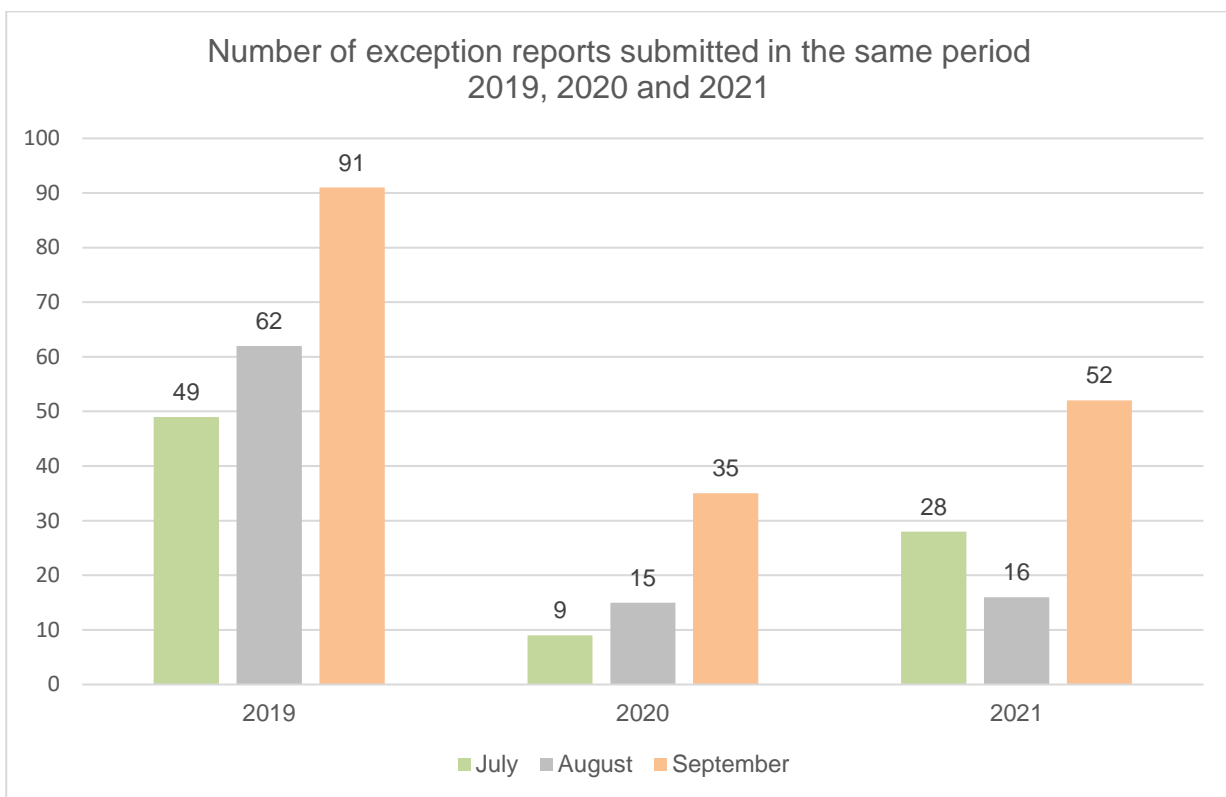
APPENDIX 1

Total number of exception reports submitted each month (Period July 2018 – September 2021)

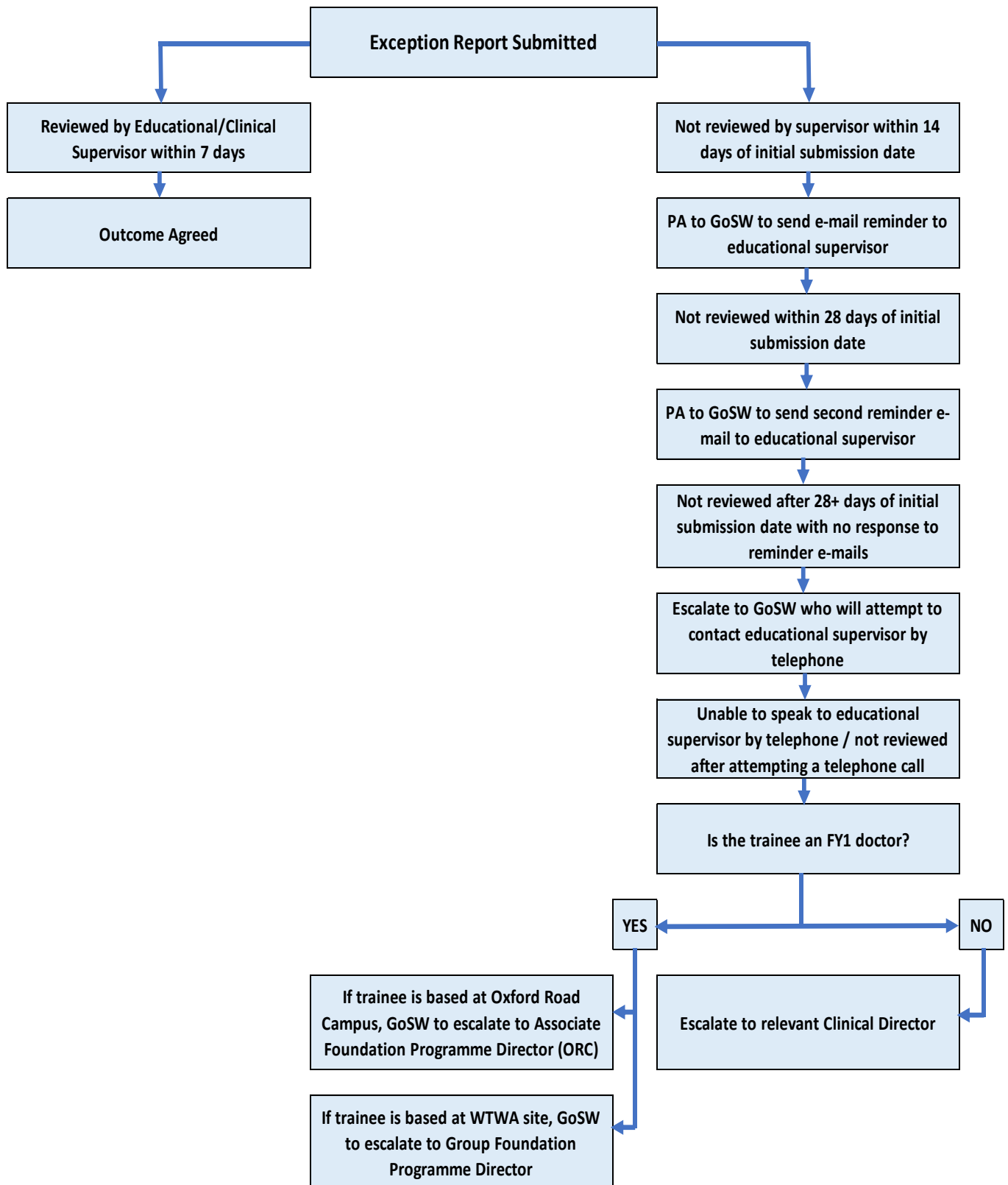
Month	Total number of exception reports raised	Total number of exception reports closed at time of report
July 2018	11	11
August 2018	59	59
September 2018	85	85
October 2018	65	65
November 2018	36	36
December 2018	23	23
January 2019	72	72
February 2019	45	45
March 2019	45	45
April 2019	27	27
May 2019	66	66
June 2019	35	35
July 2019	49	49
August 2019	62	62
September 2019	91	91
October 2019	94	94
November 2019	22	22
December 2019	44	44
January 2020	55	55
February 2020	49	49
March 2020	27	27
April 2020	4	4
May 2020	4	4
June 2020	7	7
July 2020	9	9
August 2020	15	15
September 2020	35	35
October 2020	39	39
November 2020	28	28
December 2020	40	40
January 2021	57	57
February 2021	47	47
March 2021	35	35
April 2021	19	19
May 2021	10	10
June 2021	29	29
July 2021	28	28
August 2021	16	15
September 2021	52	35
Total	1536	1518

Comparison of number of exception reports submitted for July - Sept 2021 against the same period in 2019 and 2020.

Date	Jul 2019	Jul 2020	Jul 2021	Aug 2019	Aug 2020	Aug 2021	Sep 2019	Sep 2020	Sep 2021
Number of Exception Reports	49	9	28	62	15	16	91	35	52



Escalation Process for Exception Reports



Locum Bookings (Period 01/07/21 – 30/09/21)
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Please note that the data relates to all grades of doctor not just trainees.

Locum Bookings (Bank & Agency) by Specialty				
Specialty	No. of shifts requested	No. of shifts paid	No. of hours requested	No. of hours paid
Adult and Specialist Services	98	98	728	728
Anaesthetics & Critical Care	287	251	2,825	2,452
Cardio-Vascular	236	139	2,632	1,575
Children's CAMHS	50	47	912	856
Children's Critical Care	169	154	1,756	1,568
Children's Medicine CSU One	494	345	4,103	2,822
Children's Medicine CSU Three	183	18	1,596	133
Children's Medicine CSU Two	63	56	544	461
Children's Surgery CSU One	87	71	933	743
Children's Surgery CSU Two	43	35	497	429
Children's Theatres and Anaesthetics	29	16	255	159
Community Services	35	25	315	225
Dental Hospital	151	138	1,713	1,455
Emergency Assessment and Access	498	352	4,656	3,267
GI Medicine and Surgery	566	413	5,563	4,077
Head and Neck	103	89	976	817
Imaging	12	11	102	90
Inpatient Medical Specialities	1,870	1,501	15,813	12,559
Laboratory Medicine	219	199	1,645	1,522
R Research I&E	94	85	1,037	990
Radiology	52	42	493	379
REH - Medical Rota	560	352	4,592	2,729

Locum Bookings (Bank & Agency) by Specialty				
Specialty	No. of shifts requested	No. of shifts paid	No. of hours requested	No. of hours paid
RMCH - WTWA Paediatrics - Junior Rota	6	6	68	68
RMCH - WTWA Paediatrics - Senior Rota	53	42	597	460
SMH - Genomics - Medical Rota	1	1	4	4
SMH - Gynaecology - Medical Rota	1	1	13	13
SMH - Neonates - Medical Rota	38	26	448	311
SMH - NICU - Medical Rota	10	6	105	62
SMH - Obstetrics - Medical Rota	6	6	51	51
SMH - Obstetrics & Gynaecology ORC - Medical Rota	170	130	1,096	867
SMH - Obstetrics & Gynaecology WTWA - Junior & Senior Rota	108	88	1,197	987
SMH - Reproductive Medicine - Medical Rota	10	9	31	27
TGH - General Medicine - Consultant Rota	93	93	776	776
TGH - INRU - Medical Rota	105	96	840	768
TGH - Urgent Care - Medical Rota	188	164	2,188	1,923
Urology, Renal and Transplant	50	42	674	600
WTWA - Cardiology - Senior Rota	21	19	201	185
WTWA - Cardiothoracic - Junior & Senior Rota	176	100	1,702	1,010
WTWA - Dermatology - Consultant Rota	59	58	464	456
WTWA - Emergency Medicine - Consultant Rota	21	21	184	184
WTWA - Emergency Medicine - Junior & Senior Rota	555	364	4,643	3,226
WTWA - ENT –Junior, Senior & Consultant Rota	33	28	401	357
WTWA - Gastroenterology - Consultant Rota	142	138	851	840
WTWA - General Medicine - Consultant Rota	125	96	980	748
WTWA - General Medicine - Junior Rota	515	340	4,100	2,716
WTWA - General Medicine - Senior Rota	71	33	748	362
WTWA - General Surgery - Junior & Senior Rota	97	82	922	775

Locum Bookings (Bank & Agency) by Specialty				
Specialty	No. of shifts requested	No. of shifts paid	No. of hours requested	No. of hours paid
WTWA - Obstetrics - Consultants Rota	2	2	24	24
WTWA - Respiratory - Senior Rota	51	39	384	276
WTWA - Rheumatology - Consultant & Senior Rota	23	23	184	184
WTWA - Trauma & Orthopaedics - Junior & Senior Rota	158	137	1,691	1,434
WTWA - Trauma & Orthopaedics TGH & MRI - Medical Rota	421	315	3,773	2,826
WTWA - Urology - Senior Rota	15	15	227	227
WTWA & MRI - Max Fax - Junior Rota	20	20	146	146
WTWA & MRI - Max Fax - Senior & Consultant Rota	24	19	319	278
WTWA & RMCH - Burns & Plastics - Consultant Rota	7	5	40	32
WTWA & RMCH - Burns & Plastics - Junior Rota	118	87	1,299	920
WTWA & RMCH - Burns & Plastics - Senior Rota	140	108	2,020	1,487
Not stated	9	-	83	-
NMGH- A&E	1,564	902	14,371	7,400
NMGH- ITU	82	48	964	604
NMGH Medicine	2,432	1,593	20,307	12,384
NMGH- Respiratory	89	89	666	702
NMGH-Acute Care and Common Stem	1	-	12	-
NMGH-Acute Medicine	683	568	6,005	4,607
NMGH-Ambulatory Care	165	130	1,260	969
NMGH-Anaesthetics	378	310	3,721	2,704
NMGH-Breast Surgery	75	66	627	531
NMGH-Cardiology	24	24	180	174
NMGH-Critical Care	4	4	48	46
NMGH-Emergency Medicine	121	106	1,132	1,003
NMGH-Endocrinology and Diabetes	78	78	684	669

Locum Bookings (Bank & Agency) by Specialty				
Specialty	No. of shifts requested	No. of shifts paid	No. of hours requested	No. of hours paid
NMGH-Gastroenterology	56	54	418	239
NMGH-General	4	1	33	9
NMGH-General Surgery	555	506	5,233	4,872
NMGH-Gynaecology	4	-	35	-
NMGH-Infectious Diseases	17	15	165	85
NMGH-Intensive Care	1,057	411	10,403	4,274
NMGH-Obstetrics and Gynaecology	307	108	3,198	1,155
NMGH-Oral and Maxillofacial Surgery	385	306	3,906	2,751
NMGH-Orthogeriatrics	66	66	495	406
NMGH-Orthopaedic and Trauma Surgery	335	235	3,161	2,205
NMGH-Paediatric Accident and Emergency	110	87	1,185	898
NMGH-Paediatrics and Neonates	525	314	5,065	2,801
NMGH-Urgent Care Centre	1	-	12	-
NMGH-Urology	196	112	1,706	991
Grand Total	18,855	13,329	172,143	118,117

Locum Bookings (Bank & Agency) by Grade				
Grade	No. of shifts requested	No. of shifts paid	No. of hours requested	No. of hours paid
Associate Specialist	16	16	155	160
Clinical Fellow	4	4	32	32
Consultant	3,635	2,505	32,470	20,688
Consultant & SAS	89	86	564	536
CT1	3	3	32	32
CT2	3	3	18	19
CT3	1	1	5	5
DCT	20	20	146	146
FY1	571	313	4,736	2,405
FY2	25	21	240	193
FY2-ST2	402	306	3,867	2,936
GP	9	9	52	52
JCF	5	5	43	43
Locum Consultant	1,678	1,343	13,836	10,870
Locum FY1	147	90	1,348	797
Locum GP	127	82	774	539
Locum Junior	3,641	2,734	32,785	24,648
Locum Senior	2,942	2,134	29,754	21,946
Not stated	138	126	789	706
Physician Associate	1	1	4	4
Registrar	644	453	5,692	3,708
Residential Medical Officer	1	-	12	-
Senior House Officer	2,457	1,580	22,133	13,334
Specialist Registrar	1,205	701	12,423	7,028
Speciality Doctor	717	504	6,618	4,461
ST1	8	1	64	8
ST3-ST8	337	259	3,184	2,475
Staff Grade	29	29	336	350
Trust Grade	3	-	35	-
Grand Total	18,855	13,329	172,143	118,117

Locum Bookings (Bank & Agency) by Reason				
Reason	No. of shifts requested	No. of shifts paid	No. of hours requested	No. of hours paid
Annual Leave	7	7	60	73
ANP Cover	4	4	30	-
Compassionate/Special Leave	13	1	129	48
COVID 19	94	81	809	689
COVID Recovery	5	-	74	-
COVID 19 Additional Staff	394	361	3,585	3,346
COVID 19 Isolation	220	107	2,149	1,013
ED Support Shift - Medical Staff Only	753	608	6,385	5,004
Enhanced Care	1	-	9	-
Escalation	269	217	2,613	2,101
Initiative	71	52	563	402
Maternity/Paternity/Adoption	12	8	107	62
Not stated	51	-	405	-
Planned Leave	67	55	710	600
Pool - out of hours	1	1	5	5
Restricted Duties	46	22	446	121
Sickness	630	320	6,072	3,139
Site Pressures	467	279	3,505	1,923
Study Leave	13	12	123	116
Study Leave - Induction	47	30	544	358
Training	5	5	41	41
Unplanned Leave	30	27	310	277
Vacancy	15,111	10,646	139,172	94,980
Vaccine Training	1	-	5	-
Winter Pressure 2020-21	4	4	30	30
Workload Increased	539	482	4,267	3,793
Grand Total	18,855	13,329	172,143	118,117
Percentage Fill Rate (i.e.number of shifts/hours paid -V- number of shifts/hours requested)	70%			

Locum Bookings by Year / Quarter (Hours Paid)

	2019/20	2020/21	2021/22
Quarter 1	38,679	48,205	56,681
Quarter 2	61,339	55,961	118,117
Quarter 3	44,767	58,550	
Quarter 4	54,779	51,743	

