ISC	Туре	Variance from work schedule
yes	Service Support	 As was the situation during previous nights . There is no facility for taking rest even if there is a period of inactivity during night shifts. The recliner is not ideal for my size or age . I hope ,I don't develop a back pain issue due to lying on a narrow recliner. Also there is no isolated facilities to take rest post night before driving back to home. This increases risk of mishap while driving and that's why I am marking this report as immediate concern. I was on nights on 18 and 19march and this report concern this two nights.
yes	Service Support	 Weekend list for UGI considerably heavier due to change in consultant rota. I was expected to cover approximately 60 ward patients and do the jobs in addition to clerking and doing jobs in SAU. Consultant was very supportive but we only finished ward round at 1330 which left we with no time for lunch and needed to compete all discharge letters before the 4pm deadline. I clerked 2 patients that day. Also it is not safe for 1 FY1 to cover 60 UGI patients whilst expected to clerk patients
yes	Educational	 and do jobs on SAU. Weekend list for UGI considerably heavier due to change in consultant rota. I was expected to cover approximately 60 ward patients and do the jobs in addition to clerking and doing jobs in SAU. Consultant was very supportive but we only finished ward round at 1330 which left we with no time for lunch and needed to compete all discharge letters before the 4pm deadline. I clerked 2 patients that day. Also it is not safe for 1 FY1 to cover 60 UGI patients whilst expected to clerk patients and do jobs on SAU.
	yes yes	yes Service Support yes Service Support

16 Mar 2019 08:00	yes	Educational	 Only FY1 covering all of UGI patients, approximately 55-60, on a SAU shift. Had to complete all jobs and discharges whilst getting bleeps from the ward. This significantly reduced my learning opportunity by clerking patients in SAU. I clerked only 1 patient in that day due to ward pressures. It is also very unsafe to expect 1 FY1 to cover 60 patients whilst having commitments to clerk patients and do jobs on SAU.
17 Mar 2019 08:00	yes	Educational	 Only FY1 covering all of UGI patients, approximately 55-60, on a SAU shift. Consultant was late by 2 hours to come into hospital after calling at 8am and claiming he was only a short way away. As the previous day, I had to complete all jobs and discharges whilst getting bleeps from the ward. This significantly reduced my learning opportunity by clerking patients in SAU. I clerked only 2 patient in that day due to ward pressures. It is also very unsafe to expect 1 FY1 to cover 60 patients whilst having commitments to clerk patients and do jobs on SAU.
14 Mar 2019	yes	Hours	Only 1 F1 on the floor. This has been happening very frequently for Dec2018 Gen surg F1s. Sick patients on different wards requiring immediate review but with limited manpower I could only go so fast. This delayed patient care and concerned their safety.
07 Mar 2019 07:30	yes	Service Support	Only F1 on wards
08 Mar 2019 07:30	yes	Service Support	Only F1 on ward
24 Feb 2019 18:30	yes	Service Support	I was covering elderly care wards on west build and holding crash bleep for these wards when I received a nerve centre priority request to review patient with low GCS who had a CT head on ward 126. West building is a good 3-4 minute walk afleast away from ward 126. As a crash bleep holder I don't understand how I was supposed to cover the cardiac arrest calls for west build if I was being pulled to the new building. I would definitely not make it back on time if a patient on west build arrested.
02 Mar 2019 09:45	yes	Educational	Covered the wards instead of being on call clerking patients.
12 Feb 2019	yes	Service Support	short of doctors on SAU. Only 1 fy1 and registrar. locum fy1 did not turn up. sho on study leave. concerns about patient safety and workload due to lack of doctors on sau.

14 Jan 2019 08:30	yes	Service Support	Only 2 junior doctors on the ward - inadequate ward cover.
24 Dec 2018	yes	Hours	Working more hours than my rota
02 Oct 2018	yes	Hours	Again due to limited junior cover, I was required to stay over an hour late as did my colleague
03 Oct 2018	yes	Hours	Again due to limited junior cover, I was required to stay over an hour late as did my colleague
12 Oct 2018 11:00	yes	Hours	Unfortunately on this date on SAU, there was no time for a break due to patient volume. Inadequately rota'd juniors to cover the numbers, patients at risk if this continues
08 Oct 2018 11:00	yes	Hours	Unfortunately on this date on SAU, there was no time for a break due to patient volume. Inadequately rota'd juniors to cover the numbers, patients at risk if this continues
10 Oct 2018 11:00	yes	Hours	Unfortunately on this date on SAU, there was no time for a break due to patient volume. Inadequately rota'd juniors to cover the numbers, patients at risk if this continues
27 Sep 2018 07:30	yes	Educational	The two dates given, there was no registrar cover for the wards
03 Oct 2018 07:30	yes	Educational	The two dates given, there was no registrar cover for the wards
10 Sep 2018	yes	Hours	The 10th and 11th of September I was rota'd on my own following an on-call weekend. I believe this is unsafe.
11 Sep 2018	yes	Hours	The 10th and 11th of September I was rota'd on my own following an on-call weekend. I believe this is unsafe.
02 Oct 2018 20:00	yes	Hours	I was required to cross-cover general surgery on-call, as well as ENT & Plastics, due to a rota-gap on general surgery not being filled, as per 'trust policy' and direction from the divisional chair. This resulted in me doing 2 peoples jobs and covering 6 surgical specialities, as such patient safety and care could be significantly compromised due to the workload. This is occurring on a regular basis.
01 Oct 2018 20:00	yes	Hours	I was required to cross-cover general surgery on-call, as well as ENT & Plastics, due to a rota-gap on general surgery not being filled, as per 'trust policy' and direction from the divisional chair. This resulted in me doing 2 peoples jobs and covering 6 surgical specialities, as such patient safety and care could be significantly compromised due to the workload. This is occurring on a regular basis.

21 Sep 2018 21:00	yes	Service Support	Medical staffing were aware that there was a SHO gap in the rota for clerking in AMU during the weekend nights. No cover was provided the entire weekend. All nights we had to work with 1 less doctor, department was very busy. Not safe.
22 Sep 2018 21:00	yes	Service Support	Medical staffing were aware that there was a SHO gap in the rota for clerking in AMU during the weekend nights. No cover was provided the entire weekend. All nights we had to work with 1 less doctor, department was very busy. Not safe.
23 Sep 2018 21:00	yes	Service Support	Medical staffing were aware that there was a SHO gap in the rota for clerking in AMU during the weekend nights. No cover was provided the entire weekend. All nights we had to work with 1 less doctor, department was very busy. Not safe.
12 Sep 2018	yes	Hours	Additional two hours.
	yes	Service Support	 I had to cross cover general surgery, urology, plastics and ent. I had expressed that I had patient safety concerns and that I was not happy to do this cross cover. I had a meeting with my educational supervisor and raised my concerns to the head of FY2. This was escalated to the director of surgical specialities however nothing was done to try and provide extra support. Having worked this shift I feel it was completely unsafe and not manageable due to work load. One patient had to wait 6 hours to be seen as both myself and the gen surg Reg had other emergencies to attend to. It is not acceptable for an acutely unwell patient who
			has already been seen in a and e to wait this long. The junior doctors have all expressed their patient safety concerns with a petition signed at the beginning of December, and constant input in forums. I do not think that it is fair to expect junior doctors to do this cross cover. It is putting patient safety at risk and ultimately due to the huge work load and intensity of the shift we are more likely to make errors.

24 Jul 2018 20:00	yes	Service Support	I had to cross cover general surgery, urology, plastics and ent. I had expressed that I had patient safety concerns and that I was not happy to do this cross cover. I had a meeting with my educational supervisor and raised my concerns to the head of FY2. This was escalated to the director of surgical specialities however nothing was done to try and provide extra support.
			Having worked this shift I feel it was completely unsafe and not manageable due to work load.
			One patient had to wait 6 hours to be seen as both myself and the gen surg Reg had other emergencies to attend to. It is not acceptable for an acutely unwell patient who has already been seen in a and e to wait this long.
			The junior doctors have all expressed their patient safety concerns with a petition signed at the beginning of December, and constant input in forums. I do not think that it is fair to expect junior doctors to do this cross cover. It is putting patient safety at risk and ultimately due to the huge work load and intensity of the shift we are more likely to make errors.
20 Jun 2018 08:00	yes	Service Support	Only FY1 as other members of the team oncall or post oncall, one on leave. No SHOs on. One FY1 covering all the colorectal inpatients not under take approximately 65 patients. This is an unsafe and impossible to manage.
19 Jun 2018 08:00	yes	Educational	Only F1 on to look after all colorectal patients. SNP support for ward round only.
15 Jun 2018 08:00	yes	Service Support	Only FY1 as other members of the team oncall or post oncall, one on leave. No SHOs on. One FY1 covering all the colorectal inpatients not under take approximately 65 patients. This is an unsafe and impossible to manage.
16 May 2018 17:00	yes	Hours	2 hours overtime
04 May 2018	yes	Hours	There were 3 upper GI ward rounds in the morning, and only one FY1 covering upper GI. I finished ward rounds shortly before mid-day, leaving me with a list of jobs that would have been impossible to do by 15:30 - the time I was meant to finish. I did not have time to eat lunch. There was no FY1 or SHO on the rota to cover the wards after 15:30 either, so between 15:30 and 17:15 I was being asked to see more patients, and do more jobs. I did ask nurses to get in touch with special nurse practitioners where possible, but the fact remains there was one FY1 working until 15:30, and then

			seemingly no junior doctor cover until the evening shift.
27 Apr 2018 08:00	yes	Service Support	I was the only FY1 for ward cover with 1 registrar. The rotation is understaffed with only 4 FY1s. The workload is too intense to be managed by 1 FY1 alone.
26 Apr 2018	yes	Hours	I was the only FY1 for ward cover with 1 registrar who was needed in theatre. The rotation is understaffed with only 4 FY1s. Unable to complete all the jobs within normal hours. No one on later shift to hand over jobs to.
26 Apr 2018 09:00	yes	Educational	I was the only FY1 for ward cover with 1 registrar who was needed in theatre. The rotation is understaffed with only 4 FY1s.
13 Apr 2018	yes	Hours	Completing remaining jobs from day shift.