

## Rotas and Rota Rules

The main rule for both rotas is: “maintain continuity of care to provide best care for our patients”. Rotas have been designed to provide best care and allow time and flexibility for study/research/education and work-life balance.

Ultimately the responsibility to cover the rotas is with you but we will assist you in trying to get a swap or time off when your attempts to get a solution among yourselves have failed.

Please swap continuity of care blocks as a whole (see below). Only in exceptional circumstances and only if discussed with the on call consultant for those weeks, shifts can be swapped without maintaining continuity.

## 1<sup>st</sup> tier rota:

- The so-called 1<sup>st</sup> tier rota is made up of the more experienced registrars on the unit, including the ICM trainees in their advanced year or later training.
- This rota is run and regularly updated on a web based system called CLW. You will be given a password for this when you arrive
- Nana Frempomaa is the rota coordinator. She is available via x4530 (020 8725 4530) or [nana.frempomaa@stgeorges.nhs.uk](mailto:nana.frempomaa@stgeorges.nhs.uk)
- In her absence, please contact Nichola Miles via x4164 (020 8725 4164) or [nichola.miles@stgeorges.nhs.uk](mailto:nichola.miles@stgeorges.nhs.uk) and / or the on call consultant for GICU via the main unit number 020 8725 1307.
- The 1<sup>st</sup> tier rota is made up of 8 slots and is a rolling rota: that is each person is allocated a slot (1-8) and their duties change from week to week based upon a fixed rolling pattern.

The 8 weekly patterns are shown below

## 1<sup>st</sup> tier rota:

Week	Mon	Tue	Wed	Thu	Fri	Sat	Sun
1	20:00 - 24:00	00:00 - 9:00, 20:00 - 24:00	00:00 - 9:00				
2	ICU LD 8:00 - 21:00	ICU LD 8:00 - 21:00	20:00 - 24:00	00:00 - 9:00, 20:00 - 24:00	00:00 - 9:00		
3	ICU in charge 8:00 - 21:00	ICU in charge 8:00 - 21:00	ICU in charge 8:00 - 21:00	ICU in charge 8:00 - 21:00	ICU handover/LD 8:00 - 21:00		
4			ICU LD 8:00 - 21:00	ICU LD 8:00 - 21:00	20:00 - 24:00	00:00 - 9:00, 20:00 - 24:00	00:00 - 9:00, 20:00 - 24:00
5	00:00 - 9:00						
6	8:00 - 18:30	8:00 - 18:30					
7	8:00 - 18:30	8:00 - 18:30	8:00 - 18:30	8:00 - 18:30	Pre-weekend 8:00 - 18:30	ICU LD 8:00 - 21:00	ICU LD 8:00 - 21:00
8	Post-weekend 8:00 - 18:30			8:00 - 18:30	ICU in charge 8:00 - 21:00	ICU in charge 8:00 - 21:00	ICU in charge 8:00 - 21:00

## 1<sup>st</sup> tier rota

**in light green daytime you can see continuity of care blocks for daytime cover.**

**In light blue night time you can see continuity of care blocks for night time cover.**

**In yellow: normal working days. These can be taken as leave or swapped as single days. Shifts:**

- **Single Short days (Yellow):** 08:00- 18:30: These can be clinical / education / research / study leave / annual leave. If taken as anything other than a clinical shift, this has to be agreed in advance with your educational supervisor, the consultant in charge and the information given to Nana Frempomaa (see also Off days).
- **Continuity days (in light green):** 08:00 – 21:00 (+ the preweekend and postweekend shifts 8:00 to 18:30)
  - **In charge Long days** These clinical shifts run in as Mon – Fri long days, Fri-Sun long days followed by Mon-Tue nights. These patterns are considered “Reg of the Week” (RotW) consecutive shifts with a hand over from one person to the next on Friday. The Monday handover comes from the Fri – Sun night Reg.

- The RotW role is an opportunity to take a greater part in decision making and “running” the unit. It is expected that the RotW will be aware of all GICU patients’ problems and management plans, as well as potential admissions and discharges.
- This person will allocate jobs, procedures, review of referrals, teaching of students etc.
- It is the responsibility of this person to ensure that every patient’s diagnostic coding on the WardWatcher database is completed and for ensuring all paperwork is delegated appropriately (e.g. discharge summaries, death certificates etc.)
- This person is responsible for running morning and evening handover ward rounds.
- **RotW shifts must always be swapped as a block**
- **Weekend with postweekend Monday (Friday 8:30-18:30, Sat-Sun 8:00-21:00 and Monday 8:30-18:30)** This role is to support the RotW in running the unit, taking referrals and be aware of what’s going on in the unit to help with the Monday handover.
  - **It’s very important that these four days are swapped as a block as the Friday is an important day to get to know the patients and Monday post weekend is often busy with paperwork (ie coroners’ reports) investigations follow up etc.**
- **Night shifts (N) 21:00 – 09:00:** These consecutive night shifts (2 or 3 nights) should only be swapped as a block.
- **Off days** - these are automatically allocated following nights or prior to a continuous set of day shifts. You are not obliged to be off on these days.

#### Booking leave:

- The 1<sup>st</sup> Tier rota in GICU has a component of non fixed leave. This means that you are allowed to swap shifts but please adhere to the spirit of continuity of care that the rota pattern creates as much as possible.
- One member of the rota should be elected as being in charge of it and should co-ordinate swaps and emergency cover for sick leave etc. The person in charge is expected to liaise with Nana regarding all rota issues.
- Each individual is responsible for ensuring that they are able to take their leave entitlement. Professionalism and flexibility to ensure minimal staffing levels (see below) is expected.
- You will need to complete a study / annual leave form and have it authorised by a consultant. These forms are available from Nana.
- All signed leave applications should be submitted to Nana, who will operate on a “first-come-first-served” basis. Please book your leave as early as possible since it becomes difficult to arrange leave if requests are left to the last minute.
- You will not be reimbursed for unclaimed leave days apart from in exceptional circumstances.
- **Specialty Training days** – the rota should permit all (or almost all) of the ICM trainees to attend the compulsory ICM training days. However, these still need to be booked as study leave and you will be expected to be at work on the unit unless you book this leave in advance. All other specialty training days (GIM/Anaesthetics/EM etc) will need to be booked as study leave, and are dependent upon minimum staffing numbers.

#### Minimum number of 1<sup>st</sup> Tier doctors on duty

- Monday and Friday: 2 x LD + 1 post weekend shift 8:00-18:30 on Monday and a pre-weekend shift on Friday
- Daytime Sat & Sun, and Bank holidays – 2x LD people
- Nights - 1 person

**Sick days**

- If you are unable to work due to illness please inform the registrar in charge as soon as possible.
- Please liaise with the consultant in charge of the unit that week with an estimate of how long you are likely to be off work for.
- On your return to work, you should complete a self-certificate form (available from Nana) which should be discussed with your Educational supervisor or one of the other consultants. Completed forms should be forwarded to Nana.

**Cardiothoracic ICU and Neurosurgical ICU:**

- Some of you will rotate through these units while you are a St. George's Hospital. The rotas on these units are allocated separately, and not via GICU.
- You will be warned in advance of any placement in either of these units.
- The person to contact for leave remains Nana.
- Please note that when booking leave in either of these units, you must liaise with the contact listed in this paragraph (despite what the Anaesthetics department tells you). The GICU team does not have the authority to approve leave in the other units.

**Christmas and New Year rota**

- This will be allocated at a later date. One member of the group will be assigned to coordinate a separate rota for the 2 week Xmas period. Please email your preferred shifts and which shifts you would prefer not to work to the coordinator. As far as possible shifts will be allocated fairly.

## 2<sup>nd</sup> tier rota:

### Second Tier Rota rules/ explanation of codes

- The so-called 2<sup>nd</sup> tier rota is mixed rota of “SHOs” (FY2, CMT 1-2, ACCS etc) and registrars. We work as a relatively non-hierarchical team and you are expected and encouraged to support each other under the co-ordination and direction of the 1<sup>st</sup> tier “reg of the week”.
- In the 2<sup>nd</sup> Tier rota annual leave is already fixed (see weeks 10 and 11 below). However you are still allowed to apply for leave and to organize swaps.
- This rota is run and regularly updated on a web based system called CLW. You will be given a password for this when you arrive
- Nana Frempomaa is the rota coordinator. She is available via x4530 (020 8725 4530) or [nana.frempomaa@stgeorges.nhs.uk](mailto:nana.frempomaa@stgeorges.nhs.uk)
- In her absence, please contact Nichola Miles via x4164 (020 8725 4164) [nichola.miles@stgeorges.nhs.uk](mailto:nichola.miles@stgeorges.nhs.uk) and / or the on call consultant for GICU via the main unit number 020 8725 1307.
- The 2<sup>nd</sup> tier rota is made up of 12 slots and is a rolling rota: that is each person is allocated a slot (1-12) and their duties change from week to week based upon a fixed rolling pattern.

The 12 weekly patterns are shown below:

Week	Mon	Tue	Wed	Thu	Fri	Sat	Sun
1		8:00 - 18:30	8:00 - 18:30	8:00 - 18:30	8:00 - 18:30		
2		8:00 - 18:30	8:00 - 18:30	8:00 - 18:30	HDU/ICU 8:00 - 21:00	HDU/ICU 8:00 - 21:00	HDU/ICU 8:00 - 21:00
3	HDU/ICU 8:00 - 18:30						
4	ICU 8:00 - 21:00	ICU 8:00 - 21:00	ICU 8:00 - 21:00	ICU 8:00 - 21:00	ICU 8:00 - 21:00	ICU 8:00 - 21:00	ICU 8:00 - 21:00
5	Post weekend ICU 8:00 - 18:30						
6	8:00 - 18:30	8:00 - 18:30	8:00 - 18:30	8:00 - 18:30	ICU 20:00 - 24:00	ICU 00:00 - 9:00, 20:00 - 24:00	ICU 00:00 - 9:00, 20:00 - 24:00
7	ICU 00:00 - 9:00				8:00 - 18:30		
8	ICU 20:00 - 24:00	ICU 00:00 - 9:00, 20:00 - 24:00	ICU 00:00 - 9:00, 20:00 - 24:00	ICU 00:00 - 9:00, 20:00 - 24:00	ICU 00:00 - 9:00		
9							
10							
11	HDU/ICU 8:00 - 21:00	HDU/ICU 8:00 - 21:00	HDU/ICU 8:00 - 21:00	HDU/ICU 8:00 - 21:00	ICU 8:00 - 18:30		
12	HDU/ICU 20:00 - 24:00	HDU/ICU 00:00 - 9:00, 20:00 - 24:00	HDU/ICU 00:00 - 9:00, 20:00 - 24:00	HDU/ICU 00:00 - 9:00, 20:00 - 24:00	HDU/ICU 00:00 - 9:00, 20:00 - 24:00	HDU/ICU 00:00 - 9:00	

## 2<sup>nd</sup> tier rota

**in light green daytime you can see continuity of care daytime blocks.**

**In light blue night time you can see continuity of care night blocks.**

**In yellow single days that can be taken as leave or swapped as single days.**

- Patients are allocated in the morning during the night to day handover. When you have been allocated a patient you are responsible for everything that concerns those patients (daily clerking, tests review, ordering investigations, discharge summaries etc).

#### **Shifts:**

- **Single Normal working days** (in yellow) 08:00-18:30: These are normally clinical days in the main unit (ICU) but can be clinical / education / research / study leave / annual leave. If taken as anything other than a clinical shift, this has to be agreed in advance with your educational supervisor, the consultant in charge and the information given to Nana Frempomaa (see also Off days).
- **Consecutive days (in light green)** either 8:00 to 21:00 or 8:00 to 18:30 (only Monday and Friday). Consecutive day and night shifts labeled HDU/ICU have a primary responsibility for Holdsworth HDU (when this area is in operation). When the day or night jobs in Holdsworth HDU are done the doctor helps in the main unit, while being available to attend Holdsworth HDU immediately if required. Consecutive day and night shifts labeled ICU are the on call shifts on the main unit.
- **Consecutive Night shifts** (in light blue) 21:00 – 09:00: These consecutive night shifts should only be swapped as a block. ICU nights are based in the main unit. HDU/ICU night start in Holdsworth HDU, but doctors are expected to work and help in the main unit too.
- **Off days** - these are automatically allocated following nights or prior to a continuous set of day shifts.

#### **Booking annual or study leave:**

- One member of the rota should be elected as being in charge of it and should coordinate swaps and emergency cover for sick leave etc. The person in charge is expected to liaise with Nana regarding all rota issues.
- Each individual is responsible for ensuring that they are able to take their leave entitlement. Professionalism and flexibility to ensure minimal staffing levels (see below) is expected.
- You will need to complete a study / annual leave form and have it authorised by a consultant. These forms are available from Nana.
- All signed leave applications should be submitted to Nana, who will operate on a “first-come-first-served” basis. Please book your leave as early as possible since it becomes difficult to arrange leave if requests are left to the last minute.
- You will not be reimbursed for unclaimed leave days apart from in exceptional circumstances.

#### **Minimum number of 2<sup>nd</sup> Tier doctors on duty**

##### **Daytime**

- Monday and Friday: 2 x LD + 1 post weekend shift 8:00-18:30 on Monday and a pre-weekend shift on Friday
- Tuesday to Thursday 2 x LD + 1 normal working day person
- Saturday & Sunday, and Bank holidays – 2x LD people

##### **Night time**

- Monday to Saturday morning 2 x
- Saturday and Sunday night 1 x

##### **Sick days**

- If you are unable to work due to illness please inform the registrar in charge as soon as possible.

- Please liaise with the consultant in charge of the unit that week with an estimate of how long you are likely to be off work for.
- On your return to work, you should complete a self-certificate form (available from Nana) which should be discussed with your Educational supervisor or one of the other consultants. Completed forms should be forwarded to Nana.
- **In case of a short notice sick leave gap in the rota the remaining doctors are requested to organise cover among themselves and propose a cover plan to Nana and the consultants in charge.**

#### **Christmas and New Year rota**

- This will be allocated at a later date. Please email Nana with your preferred shifts and which shifts you would prefer not to work. As far as possible shifts will be allocated fairly.