

Allocate Rota: Exception Reporting 2.0.0

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Introduction

Allocate Rota - Exception Reporting Release 2.0.0 introduces updates to support the exception reporting reforms effective by **4 February 2026**.

These reforms are intended to improve doctor wellbeing, ensure fair compensation, encourage reporting, restore trust, and support safe and more sustainable working practices.

The previous process was complex, underused, and lacked transparency, leading to missed pay and unsafe rota patterns.

This release aligns the system with the **Terms and Conditions of Service (TCS) (England) 2016 – version 13** and the **Software specification for exception reporting reform changes**.

These documents are available on the **NHS Employers** website, on the landing page for the [exception reporting reforms](#).

Exception reporting reforms

Summary of the **Exception reporting reforms implemented in this release**:

- The **Guardian of Safe Working Hours (GoSWH)** retains oversight of all exception reports.
- **Educational** exception reports are routed for review to the **Director of Medical Education (DME)**.
- **Additional Hours** exception reports are routed for processing by **HR**.
- A **three-tier approach** is used to determine whether additional hours were worked.
- **Doctors select their preferred compensation method (payment or TOIL)**, which will be honoured unless **TOIL is mandated due to a breach of rest requirements**.
- **Identifiable exception report data** may only be accessed by:
 - **HR** (Additional hours reports),
 - **GoSWH** (full access),
 - **DME** (Educational reports).
- **Clinical and Educational Supervisors are no longer required to sign off hours worked**. They must not access identifiable exception report data. It is up to the doctor whether they choose to share any information outside the system.
- **Access and completion fines apply** where system or process issues prevent a doctor from accessing the system or completing a standard exception report.
- **Proven confidentiality breaches may result in information breach fines**.
- **Doctors are required to provide evidence for Additional hours** exception reports, including time, date, location, or corroboration by another regulated professional.
- **As part of onboarding, doctors are required to submit a Test** exception report.
- The **GoSWH cross-validates system access** to ensure appropriate oversight.
- A new **Verification Manager (VM)** role has been added to support **HR** in managing **Additional hours** exception reports.



High-level visual overview

Below is a high-level overview of the exception reporting categories, processes and workflows in **Allocate Rota – Exception Reporting** to support the reforms.

Figure 1 shows the categories defined in the **TCS (England) 2016 – v13** and how reports are routed through the relevant workflows. Where safe working hours or other contractual breaches are identified, these are reviewed by the **GoSWH** and may result in further action, including fines. Where educational elements are identified and consent is provided, these are shared with the **DME** for review and any appropriate follow-up. In this case, an **Educational** exception report will be created on the **doctor’s** behalf.

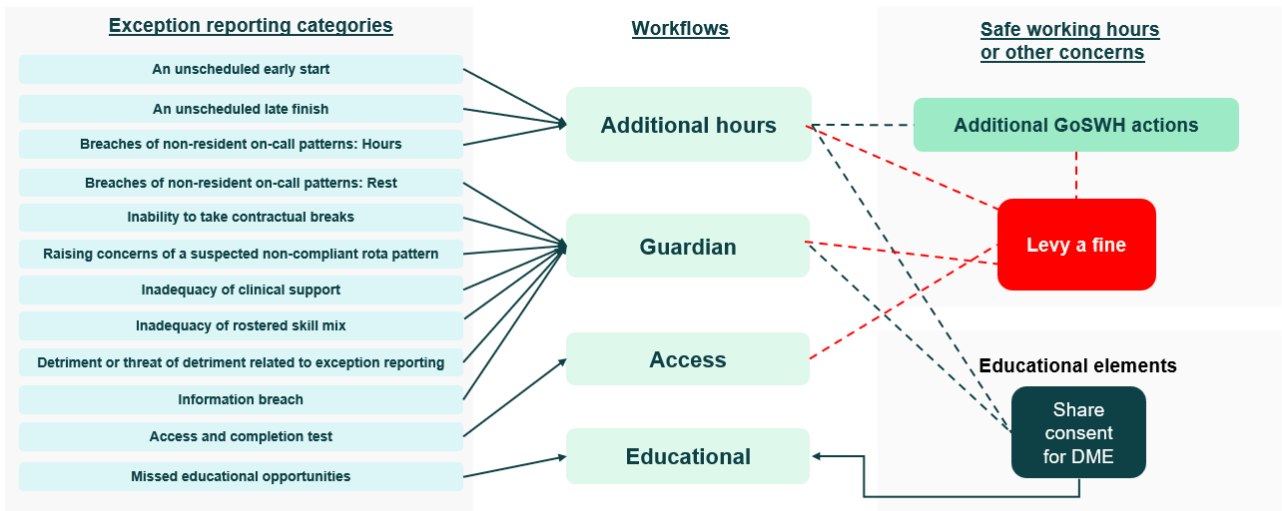


Figure 1: Exception reporting categories and workflows

Figure 2 shows how submitted exception reports are routed to the appropriate actioners, with notifications sent on submission, and additional notifications to the **GoSWH** for reports outside the 28-day window or where breaches are identified.

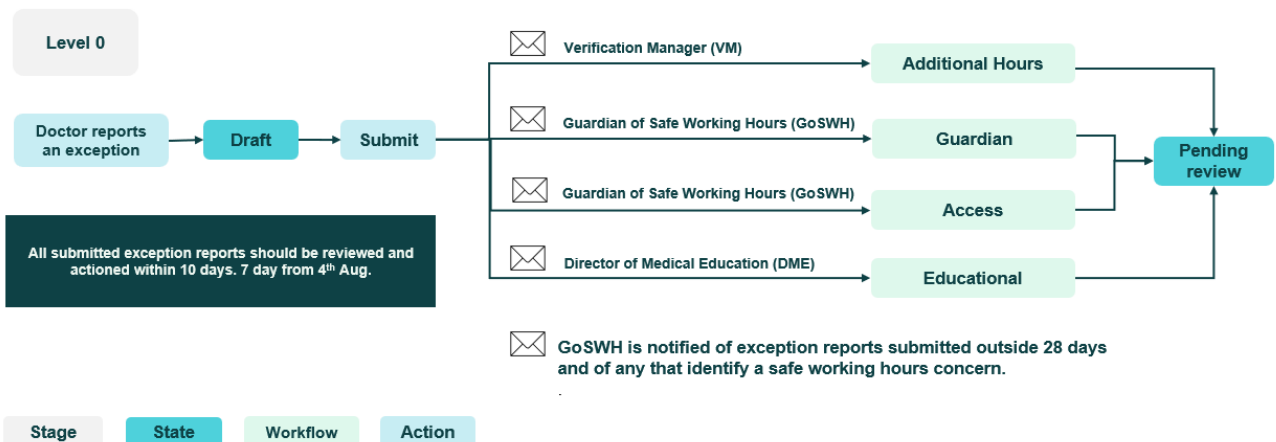


Figure 2: Submitted exception reports: actioners and workflow routing

Subsequent sections of this document provide more detail on the dashboards and processes supporting the exception reporting reforms.




Dashboards

Overview

For roles responsible for managing exception reports under the new process, a new dashboard is available and displayed by default.


If an exception report raised under the old process, needs to be reviewed, it can be accessed via the old dashboard: **Dashboard > Go to old dashboard**.

 [Go to old dashboard](#)

Note

The option to submit exception reports via the old dashboard has been removed. All newly submitted exception reports will go through the new process in line with the reforms.

You can return to the new dashboard via: **Dashboards > Go to new dashboard**.

 [Go to new dashboard](#)

Role permissions

This table outlines which roles have access to the **old dashboard**, the **new dashboard**, or **both**, and summarises their permissions.

Role	Old	New	Permissions
Doctor	✓	✓	Can submit Test and Standard exception reports via the new dashboard. Can view and manage their own exception reports.
Educational Supervisor	✓	✗	Can view and manage exception reports in the old dashboard only.
Verification Manager (VM)	✗	✓	Can view and manage Additional hours exception reports in the new dashboard only.
Director of Medical Education (DME)	✓	✓	Can view and manage Educational exception reports, including those with educational components.
Guardian of Safe Working Hours (GoWSH)	✓	✓	Can view and manage all exception reports, except for managing educational exception reports.
Trust Administrator	✓	✗	Can view and manage exception reports in the old dashboard and manage system settings.



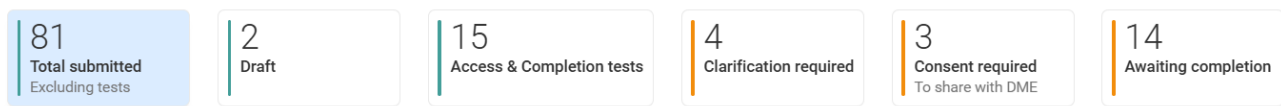
New dashboard

The new dashboard displays key metrics, a list of exception reports, and actions relevant to the user's role. A vertical line on each metric indicates whether it is informational (green), requires action (amber), or indicates a problem (red). The selected metric is highlighted.

Available actions include the ability for **doctors** to [report test exceptions](#), [report standard exceptions](#), and for all roles to [view the trust policy](#). These actions are described in more detail in the relevant sections of this document.

Doctor metrics

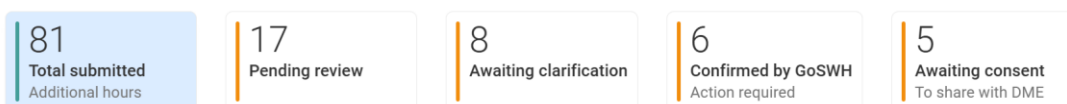
The following metrics are displayed for the **doctor**:



- Total Submitted, Excluding tests**, the number of standard exception reports submitted by the **doctor**.
- Draft**, the number of exception reports saved as drafts.
- Access & Completion tests**, the number of test exception reports submitted by the **doctor**.
- Clarification required**, the number of exception reports where the **VM** has requested clarification to support the evidence of **Additional hours** worked.
- Consent Required - To share with DME**, the number of exception reports where consent to share the details of the exception report has been requested by the **VM** or **GoSWH**.
- Awaiting Completion**, the number of **Additional hours** exception reports that have been **approved** and are awaiting confirmation from the **doctor**, to indicate that they are **complete** (i.e. **TOIL** has been taken or payment has been received).

VM metrics

The following metrics are displayed for the **Verification Manager (VM)**:



- Total Submitted, Additional hours** - the number of exception reports submitted for **additional hours** categories by **all doctors**.
- Pending review**, the number of **additional hours** exception reports that are yet to be reviewed following submission or clarification.



- c. **Awaiting clarification**, the number of exception reports where the **VM** has requested clarification to support evidence of **additional hours** worked and the **doctor** has not yet provided this information.
- d. **Confirmed by GoSWH – Action required**, the number of exception reports that were **escalated** to the **GoSWH** and subsequently **confirmed**.
- e. **Awaiting consent -To share with DME**, the number of exception reports where consent has been requested from the **doctor** to share details with the **DME** due to identified **educational** components.

DME metrics

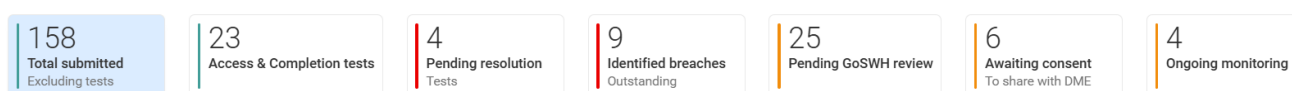
The following metrics are displayed for the **Director of Medical Education (DME)**:



- a. **Total Submitted – Educational**, the number of exception reports submitted for the **Missed Educational Opportunities** category **by all doctors**. This also includes reports where the **doctors** have provided consent to share, and the system has created **educational** exception reports **on the doctors' behalf**.
- b. **Pending review**, the number of **educational** exception reports that are yet to be reviewed following submission.

GoSWH metrics

The following metrics are displayed for the **Guardian of Safe Working Hours (GoSWH)**:

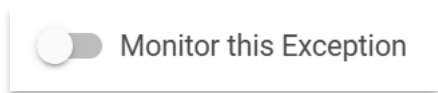


- a. **Total submitted - Excluding tests**, the number of standard exception reports submitted by **all doctors for all categories**.
- b. **Access & Completion tests**, the number of test exception reports submitted by **all doctors**.
- c. **Pending resolution - Tests**, the number of test exception reports that are awaiting resolution.
- d. **Identified breaches - Outstanding**, the number of exception reports with one or more identified breaches that have not yet been reviewed by the **GoSWH**.
- e. **Pending GoSWH review**, the number of **non-additional hours** and **non-educational** exception reports that are yet to be reviewed following submission or escalation.
- f. **Awaiting consent - To share with DME**, the number of exception reports where consent has been requested from the **doctor** to share details with the **DME** due to identified **educational** components.



- g. **Ongoing monitoring**, the number of exception reports that the **GoSWH** has flagged for monitoring using the monitoring toggle.

The **monitoring toggle** is available from within submitted exception reports for the **GoSWH** and is off by default.



Exception report list

The exception report list displays the following information:

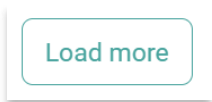
Submitted	Remaining days	Exception date	Doctor	Reference	Identified breaches	ISC	Rota	Unit/Location	Specialty	Grade	Category	Stage	State	Outcome	Additional info	Days open	Comments	Extra normal hours	Extra enhanced hours	Extra total hours
21 Jan 2026 21:53	8	18 Dec 2025	Dr Iain Banks	ChMpWHmiEP			Gen Med ST3+	Ward A	General medicine	ST3	Missed educational opportunities	0	Withdrawn			2				
21 Jan 2026 18:26	8	14 Jan 2026	Dr Doug Adams	nH2GWOsigc	Max 13h Shift		Gen Med ST3+	Ward A	General medicine	ST3	An unscheduled late finish	0	Pending review			2		01:00	02:00	03:00
21 Jan 2026 18:26		14 Jan 2026	Dr Doug Adams	H9VQgMulle	Max 13h Shift		Gen Med ST3+	Ward A	General medicine	ST3	An unscheduled early start	0	Approved	• TOIL • Fine for exceeding shift length		2		01:30		01:30
21 Jan 2026 18:22		14 Jan 2026	Dr Iain Banks	4m1vJ7TCX4	11h Rest Max 13h Shift		Gen Med ST3+	Ward A	General medicine	ST3	An unscheduled early start	2	Confirmed by GoSWH			2		02:00		02:00
21 Jan 2026 18:22		14 Jan 2026	Dr Iain Banks	gOuDYLuytS	11h Rest Max 13h Shift		Gen Med ST3+	Ward A	General medicine	ST3	An unscheduled late finish	0	Approved	• TOIL • Fine for exceeding shift length • Fine for not achieving 11 hours rest after shift		2			02:00	02:00

- a. **Submitted**, the date and time the exception report was submitted.
- b. **Remaining days**, the number of days remaining within the **10-day review period** for a submitted exception report. The number is colour-coded as follows:
 - i. **Green**: More than 3 days remaining,
 - ii. **Yellow**: Between 1 and 3 days remaining,
 - iii. **Red**: 0 days remaining, negative values are shown once the deadline has passed.
- c. **Exception date**, the date the exception occurred. This is highlighted in yellow if the exception report is submitted more than **28 days after** the exception date.
- d. **Doctor**, the name of the **doctor** who submitted the exception report.
- e. **Reference**, a unique, non-identifiable code for the exception review.
- f. **Identified breaches**, breaches of safe working hours requirements flagged **by the system or the doctor**. (*Not displayed for the DME.*)
- g. **ISC**, indicates whether the exception caused an immediate safety concern (retrospective).
- h. **Rota**, the rota against which the exception report has been raised.
- i. **Unit/Location**, the place in which the exception occurred (*displayed only if units/locations are available*).

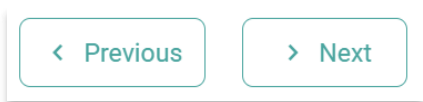


- j. **Specialty**, the specialty of the rota.
- k. **Grade**, the grade of the doctor.
- l. **Category**, the exception report category against which the exception was raised.
- m. **Stage**, the current workflow stage of the exception report.
- n. **State**, the current status within that stage. The status is colour-coded as follows:
 - i. **Yellow** – Initial action required,
 - ii. **Blue** – Secondary action required,
 - iii. **Grey** – No actions required.
- o. **Outcome**, the decision(s) taken to conclude the exception report.
- p. **Additional info**, indication of whether additional information has been provided in the exception report.
- q. **Days open**, the number of days the exception report has been open.
- r. **Comments**, indication of whether general comments have been added to the exception report.
- s. **Extra normal hours**, any extra normal hours worked for **additional hours** exception reports.
- t. **Extra enhanced hours**, any extra enhanced hours worked for **additional hours** exception reports.
- u. **Extra total hours**, the total of extra normal and extra enhanced hours worked for **additional hours** exception reports. This is **highlighted if the total additional hours worked exceed 2 hours**.

The **Load more** option, located at the bottom right of the page, displays additional exception reports, if available.



From the dashboard, you can open an exception report by selecting it. Within an exception report, the **Next** and **Previous** options allow you to move between reports without returning to the dashboard.



For the **doctor**, exception reports reported for the **previous organisation** are highlighted in grey on the dashboard.

Submitted	Remaining days	Exception date	Doctor	Reference	Identified breaches	ISC	Rota	Unit/Location	Specialty	Grade	Category	Stage	State	Outcome	Additional info	Days open	Comments	Extra normal hours	Extra enhanced hours	Extra total hours
20 Jan 2026 10:00	7	14 Jan 2026	Dr Jack Woods	Evaq0j94BC		⚠	Gen Med ST3+	Theatre 3	General medicine	FY1	The inadequacy of clinical support	0	Pending review			3				
20 Jan 2026 10:00	7	06 Jan 2026	Dr Jack Woods	pQXZGkxa5A		⚠	1:8 Renal ...		General medicine	FY1	An unscheduled early start	0	Pending review			3		02:00		02:00
16 Jan 2026 21:24	3	16 Jan 2026	Dr Jack Woods	rLKfIdbNqE		⚠	Palliative care...		Palliative medicine		An unscheduled early start	0	Pending review			7		02:00		02:00

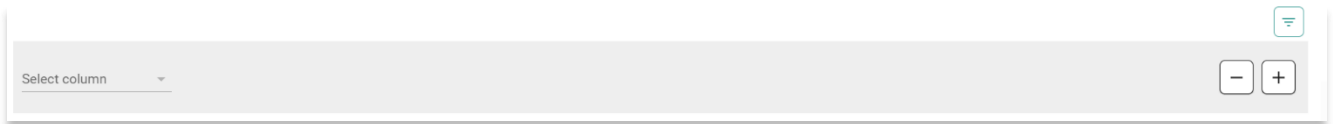


Additional filters and search

Selecting the **Filter** option at the top of the list, allows you to search or filter the exception report list.



An initial **Select a column** option is displayed.

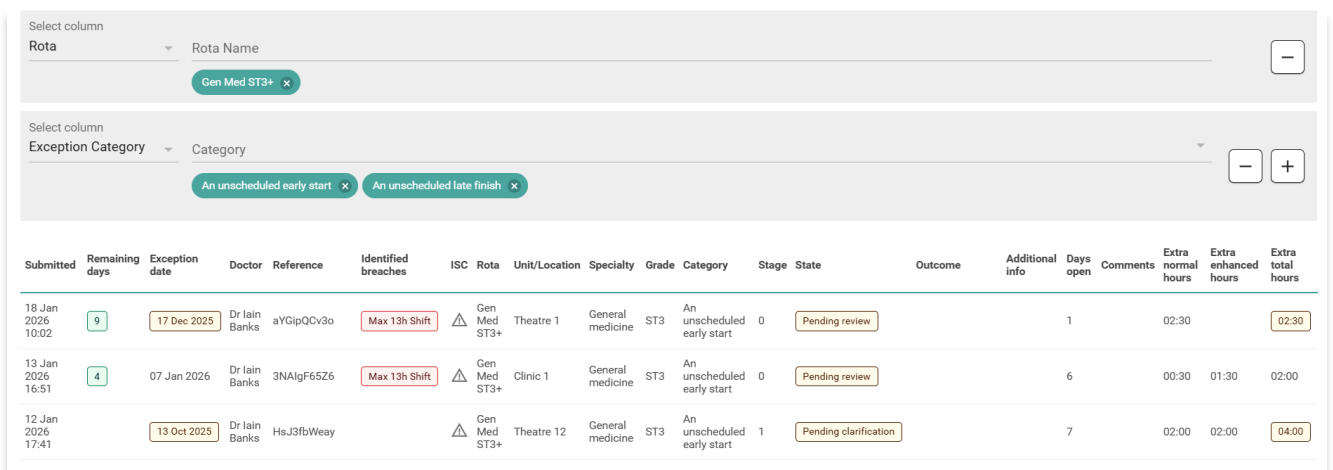


Choose a column, then enter search criteria either by typing into the text field or selecting a predefined value from the drop-down list.

The list filters automatically as soon as the first search criterion is added. Multiple values can be selected for the same column by repeatedly choosing items from the drop-down list.



Results can be further refined by adding filters for additional columns. Select the **plus (+)** button at the end of an existing filter to add a new filter row; only one filter row is permitted per column.



To remove all filters, select the **Filter** option again.

The **Filter** option is currently not available to **doctors**.



Report a Test exception (Doctor)

Doctor's can report a test exception from the new dashboard by navigating to **Dashboard>Report Test Exception**.



Selecting this option opens the **New Test Exception Report** form.

The form asks **What is the name of your rota?**

Selecting the rota name or Rota not found option is **mandatory** to submit the report.



Back To Exceptions

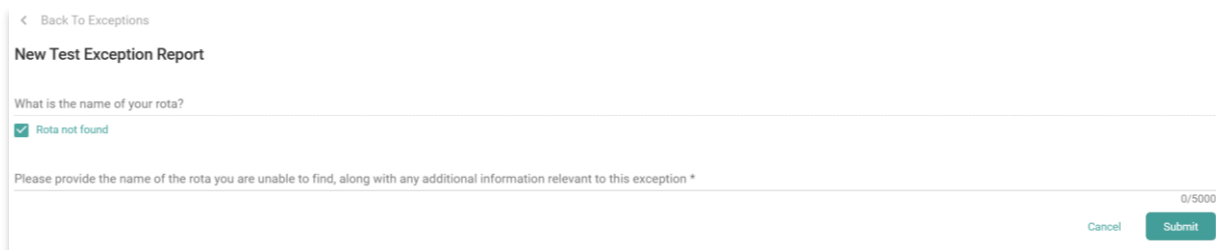
New Test Exception Report

What is the name of your rota? *

Rota not found

Cancel Submit

If the **Rota not found** option is selected, completing the comments is **mandatory**.



Back To Exceptions

New Test Exception Report

What is the name of your rota? *

Rota not found

Please provide the name of the rota you are unable to find, along with any additional information relevant to this exception *

0/5000

Cancel Submit

When the **Test** exception report is submitted:

- If the **rota was selected**, then the **state** of the exception report is set to **Complete**.
- If the **Rota not found** option was selected, then the **state** of the exception report is set to **Pending resolution** and the **GoSWH** is **notified**.

An exception report that is **Pending resolution** can be **Withdrawn** by the **doctor** at any time.

Note

Alternative processes (such as email or another method) should be available for **doctors** to report access issues if they are **unable to access Allocate Rota - Exception Reporting** or have not received login details for the system.



Report a Standard exception (Doctor)

Overview

Doctor's can report a new standard exception from the new dashboard by navigating to **Dashboard>Report Standard Exception**.



Report Standard Exception

Selecting this option opens the **New Standard Exception Report** form.

The form asks for the following information. Additional questions and information are displayed depending on the options selected.

- What would you like to report?
- What date did this occur?
- Where were you working? (*Displayed only if locations are available.*)
- What is the name of your rota?
- Select the shift you worked
- Did this exception pose an immediate safety concern? (retrospective)
- Is this the specialty you're working? – Specialty displayed from the rota
- Is this your grade? - Grade displayed as per the doctor's account
- Self-declaration confirmation

Multiple exceptions can be reported in a single exception report for the selected date, rota and shift.

Exception reports can be saved when partly completed, deleted if no longer required or submitted for review.

Complete the report

The following sections provide further details to help complete the report.

Questions and information

Details of each question and information:

What would you like to report?

For this question selecting one of the following categories is **mandatory**:

- An unscheduled early start
- An unscheduled late finish
- The inability to take contractual breaks
- The inadequacy of clinical support
- The inadequacy of rostered skills mix

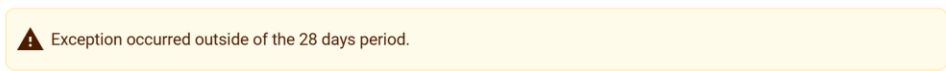


- Missed educational opportunities
- Breaches of non-resident on-call patterns: Hours
- Breaches of non-resident on-call patterns: Rest
- Raising concerns of a suspected uncompliant rota pattern
- Detriment or threat of detriment
- Information breach

What date did this occur?

For this question, selecting the date the exception occurred is **mandatory**.

If the selected date is older than 28 days from the date the report is being created, the following message is displayed:



Where were you working?

Selecting the location is **optional**. The question only displays if locations are available. The list of locations is displayed from the predefined list set up in the **Settings** area by the **Trust Administrator**

What is the name of your rota?

For this question selecting the rota being worked on the day is **mandatory**. After typing the first 3 letters, matching rotas are displayed. Only rotas that are live or have been live are displayed.

If the rota is not found, it can be reported via the **Report Test Exception** option.

Select the shift you worked

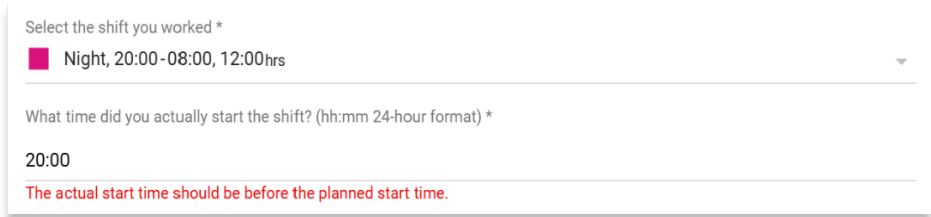
For this option, selecting the shift worked is **mandatory**. All shifts on the selected rota are displayed with the name of the shift, planned start time, planned end time and duration:



If either of the categories [An unscheduled early start](#) or [An unscheduled late finish](#) is selected an additional question is displayed:

What time did you actually start the shift? Or What time did you actually end the shift?

Depending on the category, entering the actual start time or end time is **mandatory**. The time defaults to the start time or end time accordingly.



Once the actual time has been entered, the **Extra normal hours** and or **Extra enhanced hours** are calculated in hours and minutes.

What time did you actually start the shift? (hh:mm 24-hour format) *

18:30

Extra normal time hours: 01:30:00
Extra enhanced hours: 00:00:00

Note

The **extra normal hours** and **extra enhanced hours** are calculated based on the following rules:

Enhanced hours:

1. Any hours worked between 21.00 and 07.00
2. If a shift is worked from 20.00 or after but not started later than 23.59 and is at least 8 hours long. All shift hours up to 10:00.
3. Where a shift ends after 00:00 and before 04:01, all shift hours.

Normal hours:

All hours outside of points 1-3 above.

For the categories **Breaches of non-resident on-call patterns: Hours** and **Breaches of non-resident on-call patterns: Rest**, only on-call shifts with non-resident periods are available to select.

If there are no on-call shifts with non-resident periods, the following message is displayed:

No non-resident on-call shifts available for the selected rota

If the category **Breaches of non-resident on-call patterns: Hours** is selected, the **Planned non-resident on-call work hours** is displayed in hours and minutes.

Planned non-resident on-call work hours:

05:30

and the following additional question:

How many additional non-resident on-call hours did you work?

The hours default to 00:00. Entering the **additional hours** worked in hours and minutes is **mandatory**.

How many additional non-resident on-call hours did you work? (hh:mm) *

00:00



If one of the following categories is selected, a **Safe Working Hours Confirmation** section displays with one or more statements to untick if not achieved:

[An unscheduled early start](#)

11 hours of rest prior to starting this shift were achieved

[An unscheduled late finish](#)

11 hours of rest following this shift can be achieved

[The inability to take contractual breaks](#)

Breaks were achieved on at least 75% of occasions across a 4-week reference period

[Breaches of non-resident on-call patterns: Rest](#)

5 hours of continuous rest between 22:00 and 07:00 during the NROC shift were achieved

8 hours of total rest per 24-hour during the NROC shift were achieved

[Raising concerns of a suspected uncompliant rota pattern](#)

The 48-hour average working week (across the reference period agreed for the placement) has not been exceeded

A maximum of 72 hours has been worked across any consecutive 168-hour period

Example for the category [An unscheduled early start](#):

Safe working confirmation (untick if not achieved)

11 hours of rest prior to starting this shift were achieved

If a statement is unticked, a further confirmation box is displayed.

You've indicated that the following safe working requirement was not met:
11 hours of rest prior to starting this shift

Please confirm this is correct.

To support an appropriate review and outcome, supporting evidence is required.

Did this exception pose an immediate safety concern? (retrospective)

For this question, selecting **Yes** or **No** is **mandatory**. If **Yes** is selected, the following message is displayed:

The relevant local processes should have been followed to report any immediate safety concerns.

If one of the following categories is selected: [An unscheduled early start](#), [An unscheduled late finish](#) or [Breaches of non-resident on-call patterns: Hours](#), the following additional question displays:



Would you prefer payment or TOIL?

Selecting **payment** or **TOIL** is **mandatory**.

Any further information you wish to provide for this exception

Additional information can be provided to support the exception report. The limit is 5000 characters.

In addition, one or more **attachments** can be uploaded to support the exception report.

The following text is displayed for attachments:

Helpful attachments may include timestamps (including geolocation), electronic records, emails, or other information that supports the details in this exception report.

Is this the specialty you're working?

The specialty will default to what is selected in the first slot in the rota. If necessary, it can be changed.

Is this your grade?

The grade will default to what is set in the **doctor's** account. If the grade is changed, it will be updated in the account.

Self-declaration

Confirming the self-declaration is **mandatory** to be able to submit the exception report.

Self-declaration text displayed:

I confirm that the information I am submitting adheres to the reasons for exception reporting as per paragraph 12 of the Doctors in Training Contract (England, v13) and is accurate and to the best of my knowledge.

Report additional exceptions in a single report

By selecting the **Report another exception for the selected date** option in the exception report, additional exceptions can be recorded for the same day, rota and shift.



+ Report another exception for the selected date

Depending on the category of exception selected, the relevant questions and information is displayed.



Delete Exception

What would you like to report? *

Did this pose an immediate safety concern? (retrospective) *

Yes No

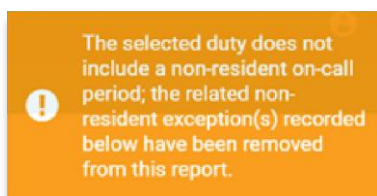
Any further information you wish to provide for this exception

Helpful attachments may include timestamps (including geolocation), electronic records, emails, or other information that supports the details in this exception report. 0/5000

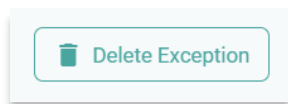
Attach file

The same category cannot be recorded more than once in the same exception report.

If, after adding another exception for a non-resident on-call category, and the shift and category of the first exception are changed to one that does not include non-resident on-call duties, then the additional exception will be deleted, and the following message will briefly be displayed:



Prior to submitting the exception report, any additional exceptions recorded can be deleted if they are no longer required, from the top right of that exception.



Save, Submit or Delete an exception report

Save an exception report

To save an exception report all required questions do not need to be completed. To complete a saved exception report, you can return to it from the Dashboard.

Submit an exception report

To submit an exception report, all **mandatory** questions need to be completed. If more than one exception is recorded in a single report, they will automatically be separated out so that they can be routed and processed by the relevant actioner and workflow. On the dashboard they will be displayed as individual exception reports.

The **doctor** and **relevant actioner(s)** are **notified** when an exception report is submitted.

Any changes made to a submitted exception report is recorded in the **change history**.



Delete an exception report

Only draft exception reports can be deleted. A confirmation message is displayed prior to deleting.

Report a standard exception at the previous organisation

For up to 28 days after moving to a new organisation, **doctors** can create an exception report for their previous organisation by navigating to **Dashboard > Report Standard Exception (Previous Organisation)**. This is if **Allocate Rota – Exception Reporting** was used at the previous organisation.

[Report Standard Exception \(Previous Organisation\)](#)

The **doctor** and **relevant actioner** at the previous organisation are **notified** when an exception report is submitted.

Note

This option is only available if the organisation used the **Doctor Move** functionality within **Allocate Rota**.



View a submitted exception report

Overview

Submitted exception reports can be viewed by navigating to:

- **Dashboard** > selecting the submitted exception report from the list.

Format of a submitted exception report:

Submitted exception report information	Stage, Status and Change history
	Identified Breaches
General comments	Workflow decisions and actions

This section provides details of **Submitted exception report information** and **Identified breaches**.

Sections highlighted in green:

Submitted exception report information	Stage, Status and Change History
	Identified breaches
General comments	Workflow decisions and actions

Submitted exception report information

For a submitted exception report, relevant information is displayed depending on the category of the exception report:

- Name of doctor** who submitted the exception report.
- Reference code**, unique identifier for the exception report.



- c. **Submitted date.**
- d. Exception report **Category.**
- e. **Exception Date.**

If submitted outside of 28 days, a warning message is displayed.



- f. **Unit/Location**, displayed only if locations are available and selected.
- g. **Rota Name.**
- h. **Shift Name.**
- i. **Actual Start Time**, hh:mm 24-hour format, for category [An unscheduled early start](#).
- j. **Actual End Time**, hh:mm 24-hour format, for category [An unscheduled late finish](#).
- k. **Planned non-resident on-call hours** for category [Breaches of non-resident on-call patterns: Hours](#).
- l. **Additional non-resident on-call hours**, hh:mm, for category [Breaches of non-resident on-call patterns: Hours](#).
- m. **Safe working hours confirmation** (unticked if not achieved):
 - i. **11 hours of rest prior to starting this shift was achieved** for [An unscheduled early start](#),
 - ii. **11 hours of rest following this shift can be achieved** for [An unscheduled late finish](#),
 - iii. **Breaks have been achieved on at least 75% of occasions across a 4-week reference period** for [The inability to take contractual breaks](#),
 - iv. **5 hours of continuous rest between 22:00 and 07:00 during the NROC shift achieved** for [Breaches of non-resident on-call patterns: Rest](#),
 - v. **8 hours of total rest per 24-hour during the NROC shift achieved** for [Breaches of non-resident on-call patterns: Rest](#),
 - vi. **48-hour average working week (across the reference period agreed for my placement) has not been exceeded** for [Raising concerns of a suspected uncompliant rota pattern](#),
 - vii. **A maximum of 72 hours has been worked across any consecutive 168-hour period** for [Raising concerns of a suspected uncompliant rota pattern](#).
- n. **Calculation of extra time**
 - i. **Extra normal time hours** in hh:mm
 - ii. **Extra enhanced time hours** in hh:mm



Note

The **extra normal hours** and **extra enhanced hours** are calculated based on the following rules:

Enhanced hours:

1. Any hours worked between 21.00 and 07.00
2. If a shift is worked from 20.00 or after but not started later than 23.59 and is at least 8 hours long. All shift hours up to 10:00.
3. Where a shift ends after 00:00 and before 04:01, all shift hours.

Normal hours:

All hours outside of points 1-3 above.

- o. **Compensation preferred**, Payment or Time Of In Lieu (TOIL).
- p. **Immediate Safety Concern (retrospective)**, Yes or No.
- q. **Further Information**, any details provided.
- r. **Attachments**, any attachments provided.
- s. **Specialty**, the specialty of the rota.
- t. **Grade**, the grade of the doctor.
- u. **Declaration statement**, acknowledged by the **doctor**.



< Back To Exceptions

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Exception Report – Dr Iain Banks

Reference Code
HmXQp4eJ1e

Submitted
21 Jan 2026 13:47

Category
An unscheduled early start

Exception Date
18 Dec 2025

▲ Exception occurred outside of the 28 days period.

Unit/Location
Ward A

Rota Name
Gen Med ST3+

Shift Name
Night (20:00-08:00, 12:00hrs)

Actual Start Time (hh:mm 24-hour format)
21 Jan 2026 17:00

Calculation of extra time
Extra normal time hours: 03:00:00
Extra enhanced hours: 00:00:00

Safe working confirmation (unticked if not achieved)
 11 hours of rest prior to starting this shift were achieved

Immediate Safety Concern (retrospective)
Yes

Compensation preferred
Payment

Further Information
Was called in early

Attachments

Specialty
General medicine

Grade
ST3

I confirm that the information I am submitting adheres to the reasons for exception reporting as per paragraph 12 of the Doctors in Training Contract (England, v13) and is accurate and to the best of my knowledge.

Identified breaches

The identified breaches are highlighted for the actioner to support the appropriate review and outcomes of the reported exception.

Depending on the category the relevant breach is highlighted based on what the **doctor** submitted.

For the maximum duty length of 13 hours, the system automatically calculates this from the planned and actual shift times.

Highlighted breaches:

- Maximum 13-hour shift length (by system)
- Minimum 11 hours' rest before a shift
- Minimum 11 hours' rest after a shift
- 25% or more of contractual breaks missed
- Maximum 48 hours' average working time per week



- Maximum 72 hours worked in any 168-hour period
- Minimum 5 hours' continuous rest for non-resident on-call
- Minimum 8 hours' total rest for non-resident on-call

E.g. for category [An unscheduled early start](#):

Identified Safety Breaches (2)

- Minimum 11 hours' rest before a shift
- Maximum 13-hour shift length (by system)

Awaiting review messages

When an exception report is submitted and awaiting review, the following messages are displayed:

For the **doctor**:

Your exception report is now awaiting review

For roles with access to the exception report, but not required to take an action:

The exception report is awaiting review

Withdraw an exception report (Doctor)

Doctors can withdraw a submitted exception report provided it has not been Rejected or Completed, by selecting the **Withdraw** option within an exception report.

LEVEL 0

State: Pending review

Your exception report is now awaiting review

[Withdraw](#)

A confirmation message is displayed before withdrawing.

Once withdrawn, the exception report **state** is updated to **Withdrawn**.

The **outcome** is set to **No further action**.

The **VM** and **GoSWH** are **notified**.

Note

Withdrawn exception reports are retained for **GoSWH** oversight.



Manage Test exception reports (GoSWH)

Access and Completion test exception reports are routed to the **GoSWH** once submitted.

When submitted the **state** is either **Complete** or **Pending resolution**.

Visual overview of process

Figure 3 provides an overview of the process for **Access and Completion test** exceptions.

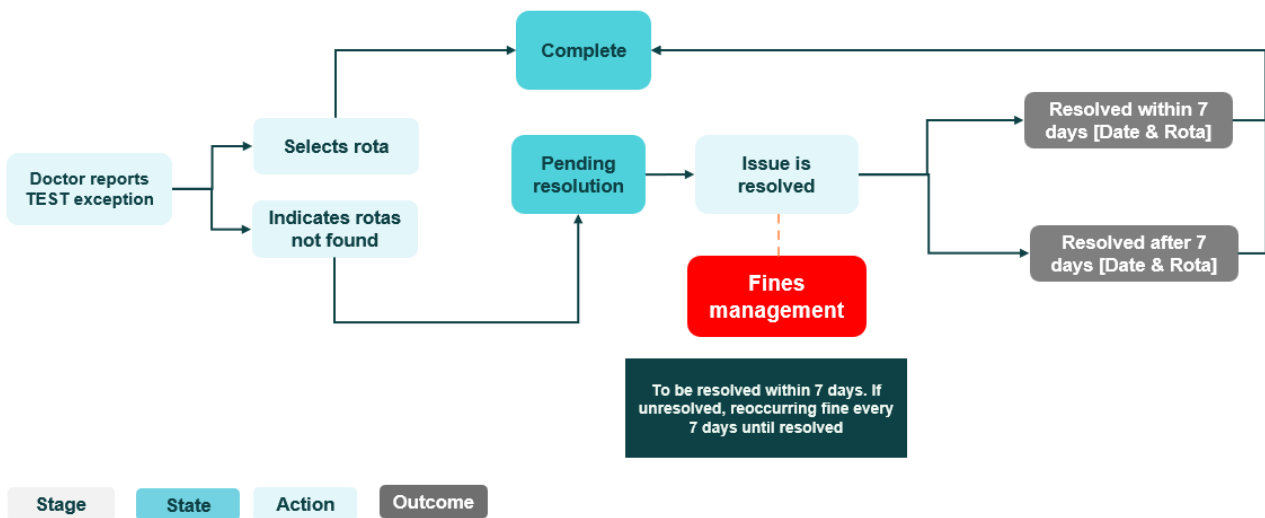


Figure 3: Access workflow

Following details are for managing the exceptions in the **state - Pending resolution**:

Available actions

When the **GoSWH** reviews an **Access and Completion test** exception report that is **Pending resolution**, they can select one of the following actions:

- Access confirmed **within** 7 days
- Access confirmed **after** 7 days



Monitor this Exception Change History

LEVEL 0

State: Pending resolution

Decision

Access confirmed within 7 days

Access confirmed after 7 days

Cancel Submit

Associated fines

No records

When selecting either action, the **GoSWH** is required to select the **rota** and enter the **date the issue was resolved**.

For **Access confirmed within 7 days**, the available date selection is limited to seven calendar days, starting from day one being the submission date of the exception report.

Monitor this Exception Change History

LEVEL 0

State: Pending resolution

Decision

Access confirmed within 7 days

Access confirmed after 7 days

Rota name *

Gen Med ST3+

Date resolved *

22 January 2026

Cancel Submit

Associated fines

No records

When an action is submitted:

The exception report **state** is updated to **Complete**.

The **outcome** is recorded as: **Resolved within 7 days**, or **Resolved after 7 days**, with the **rota name** and **resolution date**.



Monitor this Exception [Change History](#)

LEVEL 0

State: Complete

Outcome
Resolved within 7 days

Additional Information
Rota name: Gen Med ST3+
Date resolved: 22 Jan 2026

Associated fines
No records

The **change history** is updated accordingly.

The **doctor** is **notified**.



Manage Additional Hours exception reports

Overview

The **additional hours** workflow is for processing all exception reports submitted under the following categories:

- An unscheduled early start
- An unscheduled late finish
- Breaches of non-resident on-call patterns: Hours

and is based on the following 3-tier system:

- Level 0: Verification by Verification Manager.
- Level 1: Clarification by Doctor, if necessary.
- Level 2: Escalation to Guardian of Safe Working Hours, if necessary.

Visual overview of process

The following figures illustrate the three-level process for reviewing and managing **additional hours** exception reports.

Figure 4 provides an overview of the **Level 0** process, where an initial check is carried out to confirm whether the **additional hours** reported by the **doctor** are accurate and can be verified without escalation.

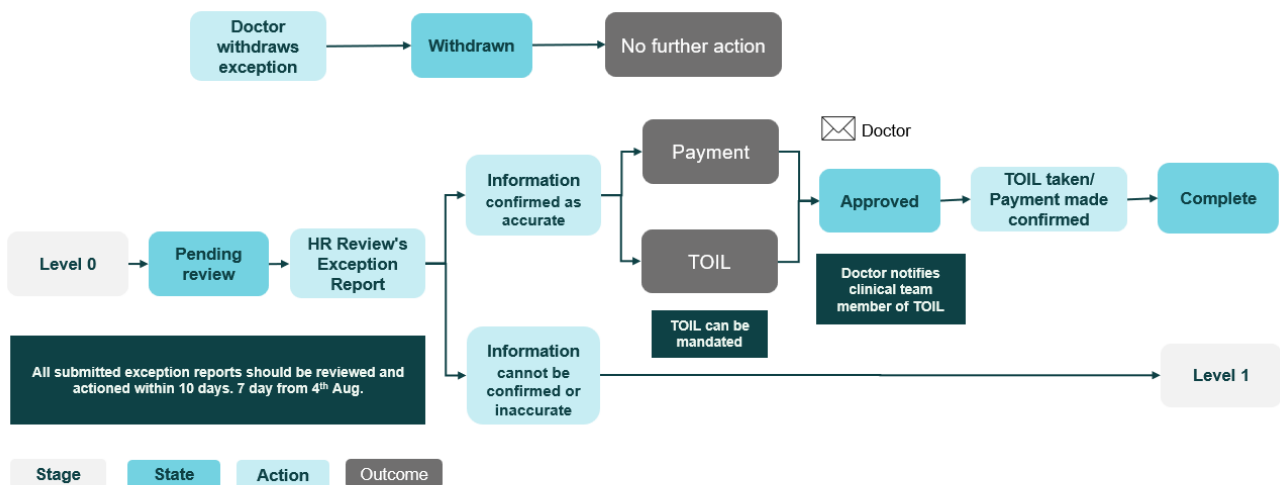


Figure 4: Additional hours workflow (Level 0 – Verification)

Figure 5 provides an overview of the **Level 1** process, where the **doctor** is asked to clarify or update the information provided, followed by a further review to determine whether the **additional hours** can be verified or require escalation.



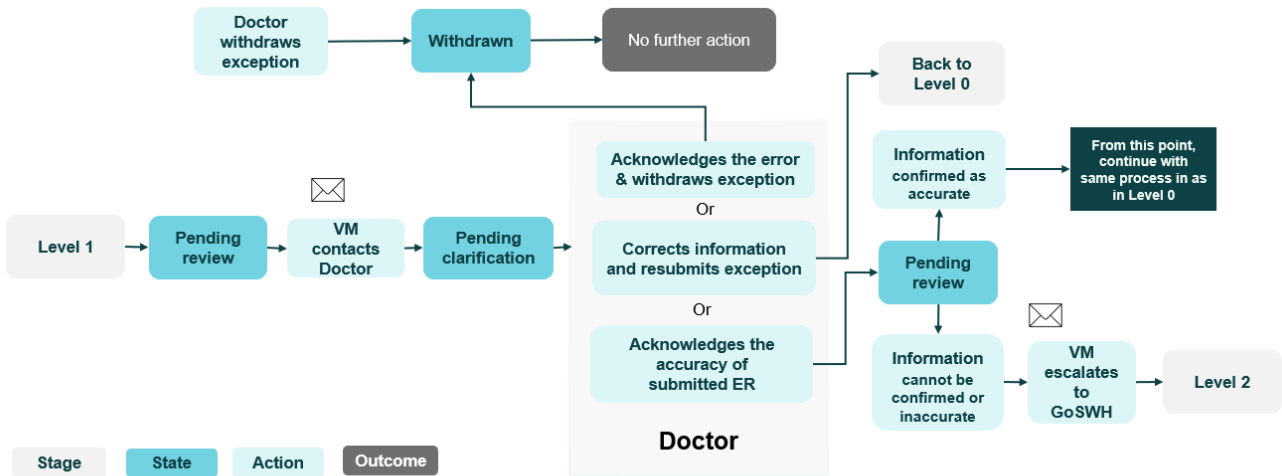


Figure 5: Additional hours workflow (Level 1 – Clarification)

Figure 6 provides an overview of the Level 2 process, where the exception report is escalated to the GoSWH to reach a final decision when the additional hours cannot be verified at earlier stages.

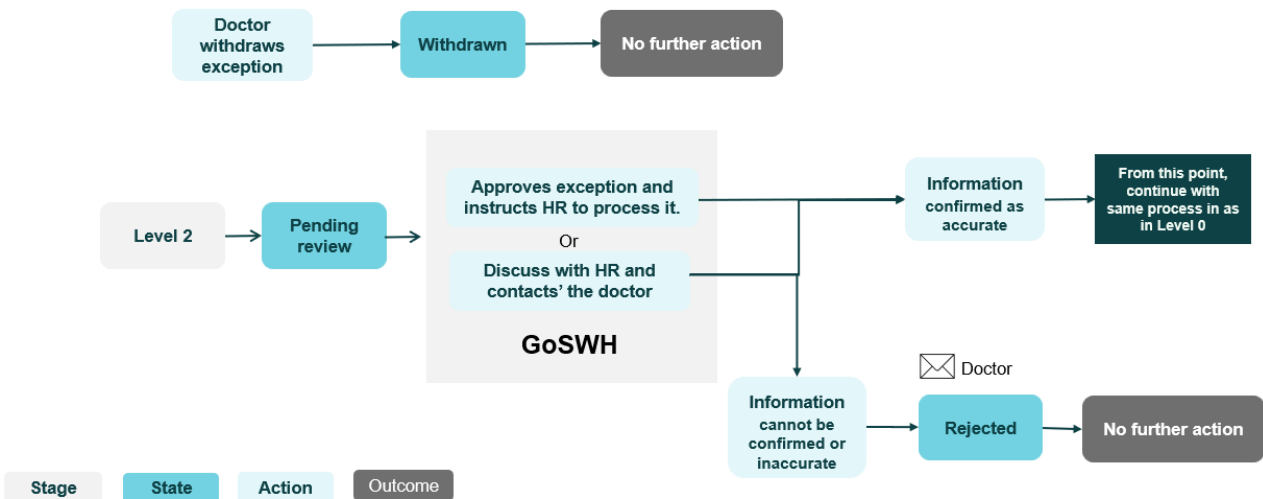


Figure 6: Additional hours workflow (Level 2 – Escalation)

The following sections describe the actions or information available at each stage for the relevant actioners, as necessary.

Level 0: Verification (VM)

When an additional hour's exception report is submitted, it enters Level 0 – Pending review.

At this stage, the VM can perform optional actions or make a decision to progress the report:



LEVEL 0 ↻ Change History

State: Pending review Mandate TOIL Share with DME

Decision

Information verified - Proceed with Payment

Clarification required - Proceed to Level 1

Cancel Submit

Optional actions

Mandate TOIL – Where the doctor’s preferred compensation option is **payment**, the **VM** can mandate **TOIL** if a breach of safe working hours rest requirements is identified.

Request Consent to Share with DME – Where educational components are identified within the exception report, the **VM** can request consent from the **doctor** to share the report with the **DME**.

Required actions

At this stage, the **VM** must review the details provided by the **doctor** and select relevant action as part of their decision:

- **Information Verified** – Proceed with **payment** or **award TOIL**, as appropriate.
- **Clarification Required** – The exception report moves to **Level 1**

Information verified

When **Information Verified – Proceed with Payment** or **Proceed to Award TOIL** is selected:

The exception report **state** is updated to **Approved**.

The **outcome** is recorded as **Payment** or **TOIL**, as applicable.

The **change history** is updated accordingly.

The **doctor** is **notified** of the outcome and asked to confirm completion once **payment** has been received or **TOIL** has been taken.

LEVEL 0 ↻ Change History

State: Approved Change to TOIL Share with DME

Outcome

Payment



Clarification required

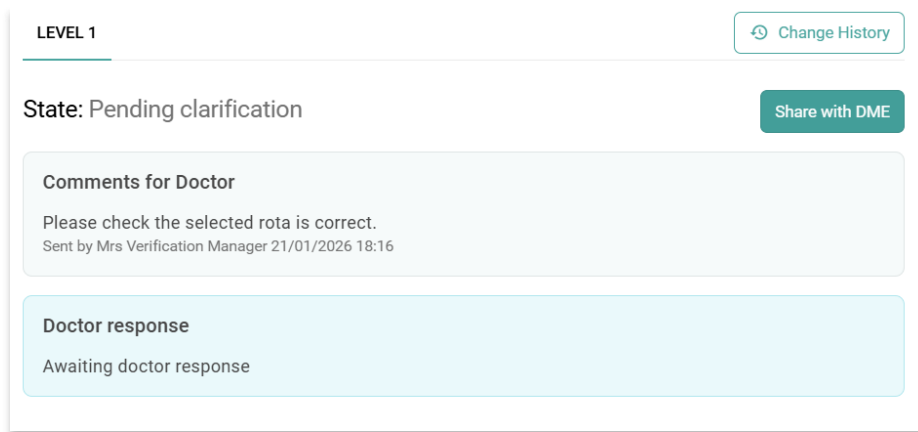
When **Clarification required – Proceed to Level 1** is selected:

The exception report **stage** is updated to **Level 1**, and the **state** is set to **Pending clarification**.

The **VM** is required to provide comments outlining the information that requires clarification or correction.

The **change history** is updated accordingly.

The **doctor** is **notified** and can view with the comments provided by the **VM**.



LEVEL 1 ↻ Change History

State: Pending clarification Share with DME

Comments for Doctor

Please check the selected rota is correct.
Sent by Mrs Verification Manager 21/01/2026 18:16

Doctor response

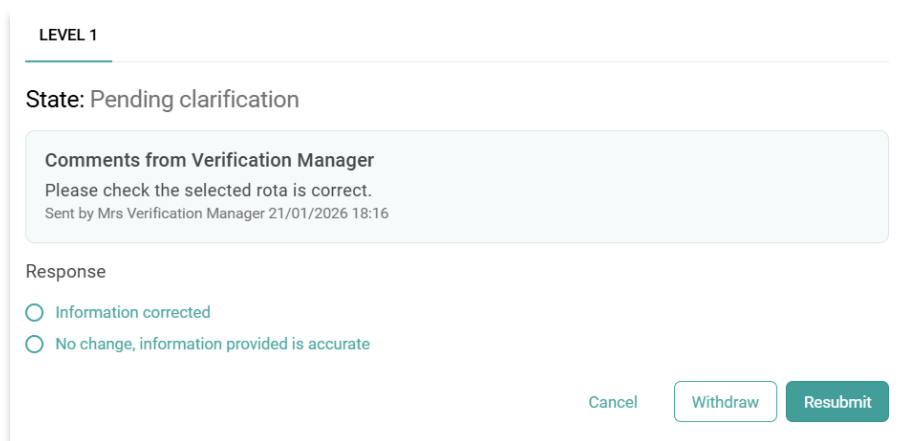
Awaiting doctor response

Level 1 – Clarification (Doctor, VM)

When an exception report is in **Level 1 – Pending clarification**:

The **doctor** has the following options available, including the option to **Withdraw** the exception report:

- **Information corrected**
- **No Change – Information provided is accurate**



LEVEL 1

State: Pending clarification

Comments from Verification Manager

Please check the selected rota is correct.
Sent by Mrs Verification Manager 21/01/2026 18:16

Response

Information corrected

No change, information provided is accurate

Cancel Withdraw Resubmit




Clarification responses (Doctor)

Information corrected

For **Information corrected**, the **doctor** is required to update the exception report, provide comments, and confirm the self-declaration.

Where **TOIL was mandated**, the doctor cannot update the preferred compensation method. The following message is displayed in place of the option to change the preferred compensation method:

 The preferred compensation method was payment; however, TOIL was mandated due to a breach of rest requirements.

LEVEL 1

State: Pending clarification

Comments from Verification Manager
Please check the selected rota is correct.
Sent by Mrs Verification Manager 21/01/2026 18:16

Response

Information corrected

No change, information provided is accurate

Comments *

0/5000

I confirm that the information I am submitting adheres to the reasons for exception reporting as per paragraph 12 of the Doctors in Training Contract (England, v13) and is accurate and to the best of my knowledge.

When **Information corrected** is submitted:

The **stage** is returned to **Level 0**, and the **state** is updated to **Pending review**.

The **change history** is updated accordingly.

The **VM** is **notified** and can view the comments provided by the **doctor** in the **change history**.

Once submitted, the **doctor** sees the following message:

Your exception report is now awaiting review

No change – information provided is accurate

When **No Change – Information provided is accurate** is submitted, the **doctor** is confirming that that the information previously provided in the exception report is accurate.



LEVEL 1

State: Pending clarification

Comments from Verification Manager
 Please check the selected rota is correct.
 Sent by Mrs Verification Manager 21/01/2026 18:16

Response

Information corrected

No change, information provided is accurate

Cancel Withdraw Resubmit

Once submitted, the **doctor** sees the following message:

The resubmitted exception report is awaiting review

The exception report **stage** remains at **Level 1**, and the **state** is updated to **Pending review**.

The **change history** is updated accordingly.

The **VM** is **notified** and the status message on the exception report is updated to **Information updated**.

No change response - Optional actions and Required actions

(VM)

The **VM** can review the exception report details again and determine the appropriate action.

At this stage, the following actions are available:

Optional actions

Mandate TOIL – Where the doctor’s preferred compensation option is **Payment**, the **VM** can mandate **TOIL** if a breach of safe working hours rest requirements is identified.

Request Consent to Share with DME – Where educational components are identified within the exception report, the **VM** can request consent from the **doctor** to share the report with the **DME**.

Required actions

The **VM** must select one of the following decisions to progress the exception report:

- **Information verified – Proceed with Payment or Proceed to award TOIL**
- **Escalate to Guardian of safe working hours review**



LEVEL 1 ↻ Change History

State: Pending review Mandate TOIL Share with DME

Comments for Doctor

Please check the selected rota is correct.
Sent by Mrs Verification Manager 21/01/2026 18:18

Doctor response

21/01/2026 20:01
Information updated

Decision

Information verified - Proceed with Payment

Escalate to Guardian of Safe Working Hours review stage

Cancel Submit

Information verified

When **Information verified – Proceed with Payment** or **Proceed to award TOIL** is selected, the same process applies as described for **Level 0**.

The **change history** is updated accordingly.

Escalate to GoSWH

When **Escalate to Guardian of Safe Working Hours review** is selected:

The **VM** is required to provide a comment for the **GoSWH**.

The exception report **stage** is updated to **Level 2**, and the **state** is set to **Pending review**.

The **change history** is updated accordingly.

The **GoSWH** is **notified** with the comment, which is also visible on the exception report.

The **VM** sees the following message:

GoSWH response

Awaiting GoSWH response

Level 2: Escalation to Guardian of Safe Working Hours

When the **GoSWH** reviews an escalated exception report:

The **GoSWH** can take the following actions:

Optional actions



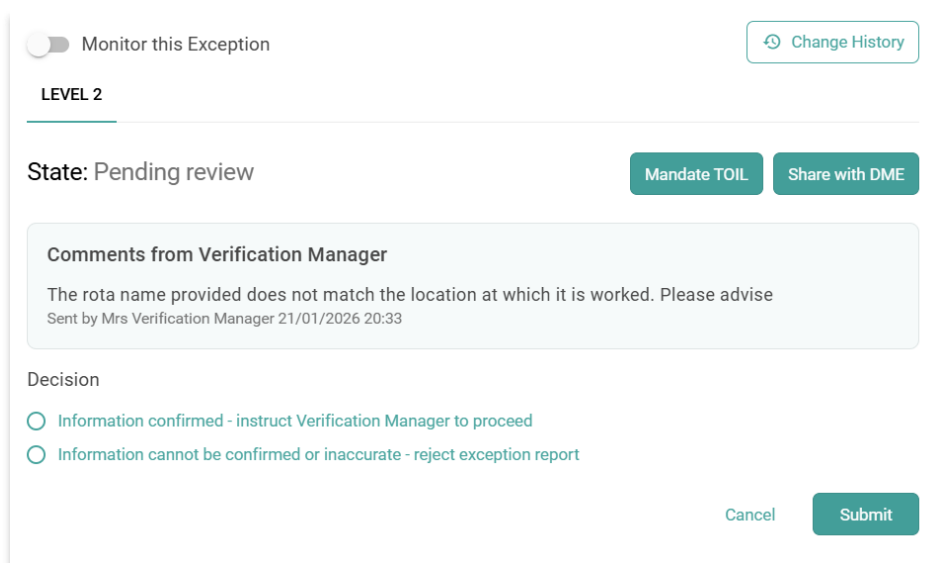
Mandate TOIL – Where the doctor’s preferred compensation option is **payment**, the **VM** can mandate **TOIL** if a breach of safe working hours rest requirements is identified.

Request Consent to Share with DME – Where educational components are identified within the exception report, the **VM** can request the consent from the **doctor** to share the report with the **DME**.

Required actions

At this stage, the **GoSWH** must review the details provided by the **doctor** and select the relevant action as part of their decision:

- **Information confirmed – Instruct Verification Manager to proceed**
- **Information cannot be confirmed or Is inaccurate – Reject exception report**



Monitor this Exception Change History

LEVEL 2

State: Pending review Mandate TOIL Share with DME

Comments from Verification Manager

The rota name provided does not match the location at which it is worked. Please advise
 Sent by Mrs Verification Manager 21/01/2026 20:33

Decision

Information confirmed - instruct Verification Manager to proceed
 Information cannot be confirmed or inaccurate - reject exception report

Cancel Submit

Information confirmed

When **Information confirmed – Instruct Verification Manager to proceed** is selected, the same process applies as described for Level 0.

The **state** is updated to **Confirmed by GoSWH**.

The **change history** is updated accordingly.

The following message is displayed on the exception report for the **GoSWH**:

Awaiting Verification Manager to process the exception report

Message displayed on the exception report for the **doctor**:

The information has been confirmed by the GoSWH. Awaiting Verification Manager to process the exception report

The **VM** is **notified**, and the following displayed on the exception report:



LEVEL 2 ↻ Change History

State: Confirmed by GoSWH Share with DME

Comments for GoSWH

The rota name provided does not match the location at which it is worked. Please advise
Sent by Mrs Verification Manager 21/01/2026 20:33

GoSWH response

The information has been confirmed as accurate

Proceed with Payment

Information cannot be confirmed - Reject report

When **Information cannot be confirmed or Is inaccurate – Reject exception report** is selected:

A reason for rejection must be provided.

The exception report **state** is updated to **Rejected**.

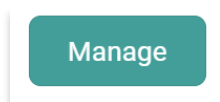
The **outcome** is set to **No further action**.

The **change history** is updated accordingly.

The **doctor** is **notified** with the reason.

Manage additional hours exception reports - verification and clarification (GoSWH)

For **Additional hours** exception reports in **Level 0 – Pending review**, the **GoSWH** has access to a **Manage** option within the report.



When **Manage** is selected, the **GoSWH** can perform the same actions as the **VM** for that exception report.

The exception report remains in **Pending review** but for the **GoSWH** rather than the **VM**.

Selecting **Manage** is recorded in the **change history**.

Where the **GoSWH** is managing an exception report at **Level 0**, they can continue to manage it automatically if it progresses to **Level 1**. The escalation action is labelled **Move to Level 2**, instead of **Escalate to Guardian of Safe Working Hours review stage**.



Mandate TOIL (VM, GoSWH)


For **Additional hours** exception reports in **Level 0, Level 1, or Level 2 – Pending review**, where the doctor has selected **Payment** as their preferred method of compensation:

A **Mandate TOIL** action is available to prevent unsafe working hours.



Mandate TOIL

Comments for the doctor are required when mandating TOIL.



Mandate TOIL

Reason * 0/5000

[Cancel](#) [Update](#)

Once submitted, the decision and comments are recorded in the **change history**.

The **doctor** is **notified** with the comments.

Where the action is taken by the **VM**, the **GoSWH** is also **notified**.

Acknowledge completion (Doctor)

For **additional hours** exception reports, once **payment or TOIL** has been completed, the **doctor** can confirm completion by selecting the **Acknowledge completion** option within the exception report.



Acknowledge completion

After acknowledgement:

The exception report **state** is updated to **Complete** and the **Acknowledge completion** option is removed.

The **VM** and **GoSWH** no longer see the outcome change options.

Change outcome: Payment ↔ TOIL (VM, GoSWH)

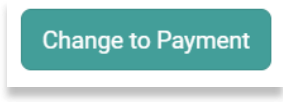
For **additional hours** exception reports, the outcome can be changed between **payment** and **TOIL** directly from within the exception report.



The relevant option is available **after an outcome has been set** and **before the doctor has acknowledged completion**.



Or



When changing the **outcome**, a reason is required.

The **doctor** is **notified** when changed.

The **change history** is updated accordingly.

Manage additional hours safety concerns (GoSWH)

The **GoSWH** can review all exception reports that have progressed through the **additional hours'** workflow.

Visual overview of process

Figure 7 provides an overview of the extended process for reviewing and managing **additional hours** exceptions.

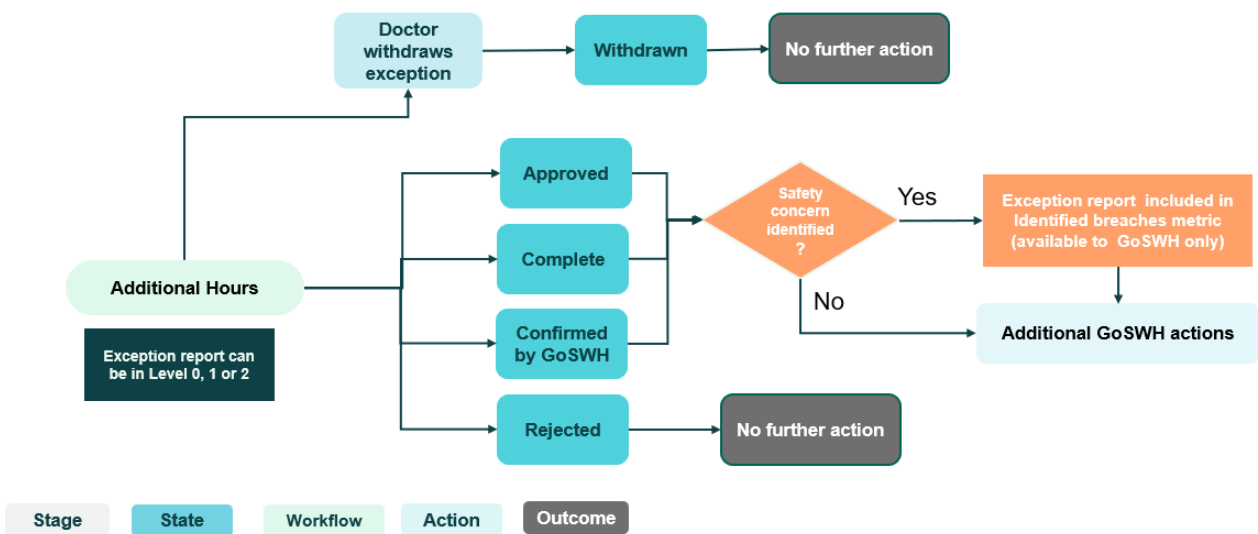


Figure 7: Additional hours (Review for safe working hours concerns)



When the exception report is in one of the following **states**:

- **Level 2 – Confirmed by GOSWH**
- **Level 0 or Level 1 – Approved or Complete**

the following actions are available to the **GoSWH**:

LEVEL 0

State: Approved Change to TOIL Share with DME

Outcome

Payment

Decision

Select action(s)

- Fine for not achieving 11-hours rest before shift
- Recommend work schedule review

No further action

Comments for doctor *

0/5000
Cancel Submit

Optional action

Request Consent to Share with DME – Where educational components are identified within the exception report, the **GoSWH** can request consent from the **doctor** to share the report with the **DME**.

Required actions

At this stage, the **GoSWH** must review the details provided by the **doctor** and select relevant action(s) as part of their decision.

- **Fine for Exceeding Shift Length**
(Available only where a breach has been identified by the system)
- **Fine for Not Achieving 11 Hours’ Rest Before the Shift**
*(Available only where a breach has been identified for the **Unscheduled Early Start** category)*
- **Fine for Not Achieving 11 Hours’ Rest After the Shift**
*(Available only where a breach has been identified for the **Unscheduled Late Finish** category)*
- **Recommend Work Schedule Review**

Alternatively

The **GoSWH** can select:

- **No Further Action**



Submitting the decision

The **GoSWH** must select at least one action (**fine**, **work schedule review**, or **no further action**) before submission is enabled.

A comment for the **doctor** is required for all actions **except No further action**.

After submission, the exception report displays updated information to indicate it has been reviewed by the **GoSWH**, for example:

- **Approved (Reviewed by GOSWH)**
- **Completed (Reviewed by GOSWH)**

The **relevant outcome(s)** are displayed **except for No further**.

Outcome

- TOIL
- Fine for exceeding shift length [Add Fine Details](#)

The **doctor** is **notified** of the outcome and comments.

The **change history** is updated accordingly.

Note

Where the **GoSWH** recommends a work schedule review, this is managed outside the exception reporting process, in line with the reforms, as **Educational Supervisors** are no longer responsible for managing exception reports.

Dashboard Filtering for reviewed additional hours

A **Reviewed (Additional Hours)** filter is available on the dashboard for the **GoSWH**.

When selected, the following options are displayed:

Yes – Displays **additional hours** exception reports that have been reviewed by the **GoSWH**.

No – Displays **additional hours** exception reports that have not yet been reviewed by the **GoSWH**.

Select column

Reviewed Additional Hrs Yes No - +



Manage Educational exception reports (DME)

Missed educational opportunities exception reports are routed for processing to the **DME**.

When an **educational** exception report is submitted, it enters **Level 0 – Pending review**.

Visual overview of process

Figure 8 provides an overview of the process for **educational** exception reports.

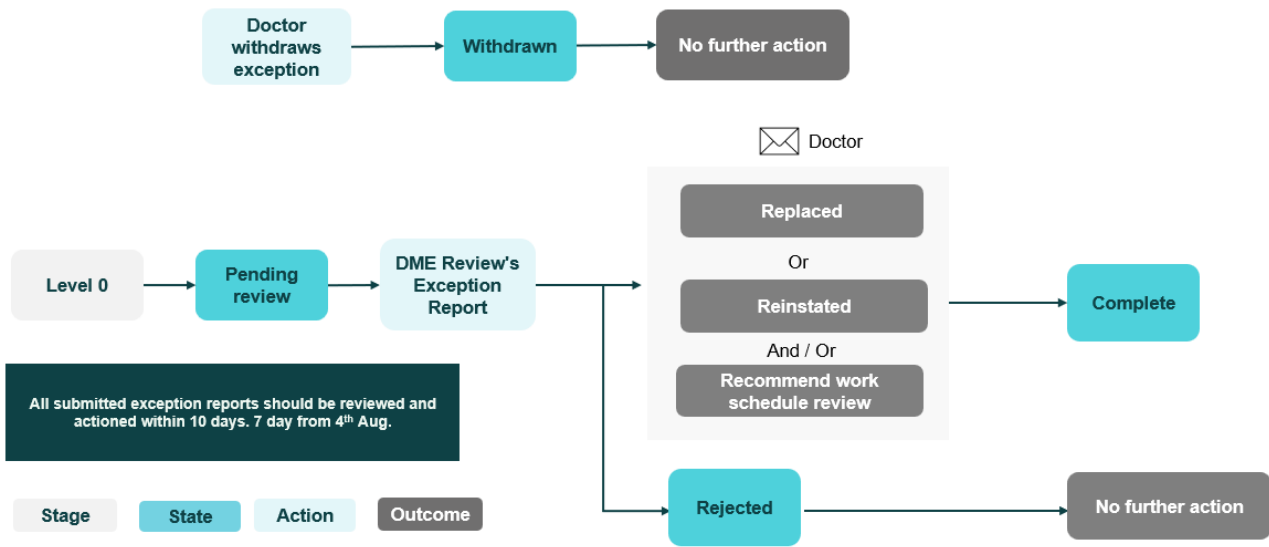


Figure 8: Educational workflow

Required actions

At this stage, the **DME** must review the details provided by the **doctor** and select relevant action(s) as part of their decision.

LEVEL 0 Change History

State: Pending review

Decision

Select action(s)

- Replace educational opportunity
- Reinstate educational opportunity
- Recommend work schedule review

No further action

Comments for Doctor * 0/5000

Cancel Submit



The **DME** can select one of the following actions:

- **Replace educational opportunity**
- **Reinstate educational opportunity**
- **No further action**

In addition, the **DME** can **Recommend a work schedule review**.

Submitting the decision

Providing comments for the **doctor** are required for all actions.

When the **DME** submits their decision, the **doctor** is **notified** of the outcome with the comments.

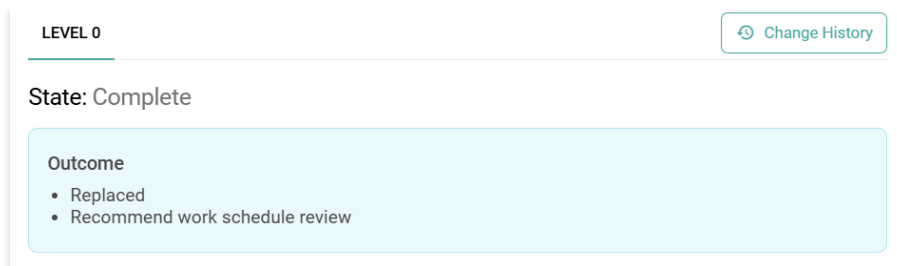
The **change history** is updated accordingly.

If **Replace educational opportunity**, **Reinstate educational opportunity**, and/or **Recommend work schedule review** is selected:

The exception report **state** is updated to **Complete**

The **outcome** is recorded as:

- **Replaced**, or
- **Reinstated**, and/or
- **Recommended work schedule review**, as applicable.



LEVEL 0 Change History

State: Complete

Outcome

- Replaced
- Recommend work schedule review

If **No further action** is selected:

The exception report **state** is updated to **Rejected**.

The **outcome** is set to **No further action**.

Note

Where the **DME** recommends a work schedule review, this is managed outside the exception reporting process, in line with the reforms, as **Educational Supervisors** are no longer responsible for managing exception reports.



Educational exception reports created following consent

Where a **doctor** has granted consent to share the exception report with the **DME** for reviewing educational components, the system automatically creates a new **Missed educational opportunities** exception report. The new exception report displays the original reference and copies across the information provided in the original report.

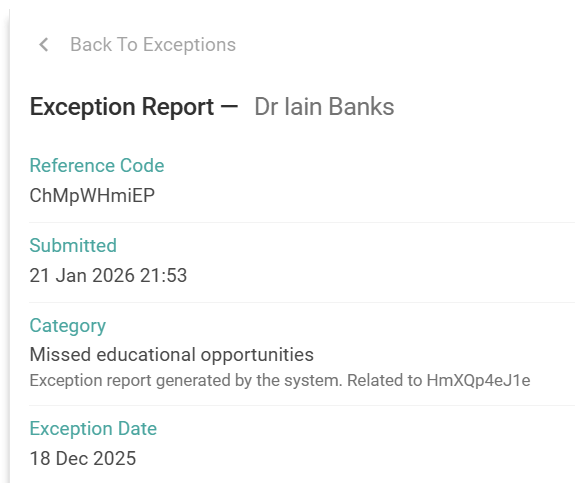
The **change history** records:

- The date and time the new exception report was created
- The reference of the original exception report

The newly created exception report is visible on the **DME** dashboard and included in their **Pending review** metric.

The **DME** can review and action the newly created exception report in the same way as the other reports.

Original exception report reference displayed in the report (Related to and then the reference code):



The screenshot shows a card for an 'Exception Report' for 'Dr Iain Banks'. It contains the following information:

- Reference Code:** ChMpWHmiEP
- Submitted:** 21 Jan 2026 21:53
- Category:** Missed educational opportunities
Exception report generated by the system. Related to HmXQp4eJ1e
- Exception Date:** 18 Dec 2025



Manage other categories exception reports (GoSWH)

All exception reports, **except** those for **access**, **additional hours**, or **educational** categories, are routed to **Level 0 – Pending review** in the Guardian workflow for the **GoSWH**.

Visual overview of process

Figure 9 provides an overview of the process for exception reports that follow the Guardian workflow.

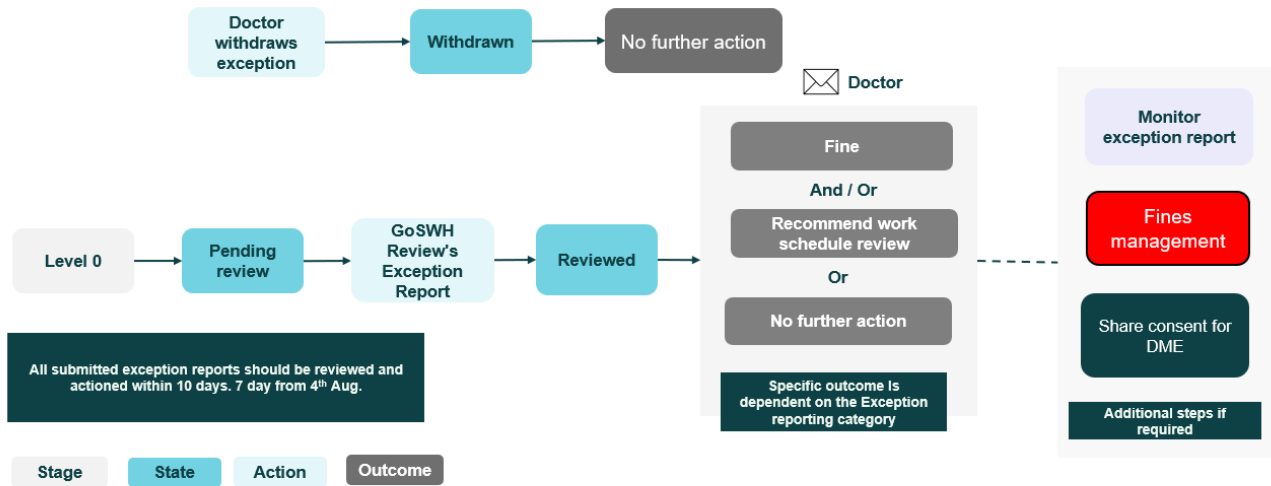


Figure 9: Guardian workflow

At this stage, the **GoSWH** can review the details entered by the **doctor** and select the appropriate action(s).

Example for: [Raising concerns of a suspected uncompliant rota pattern](#)

The screenshot shows the Guardian workflow interface for reviewing an exception report. At the top, there is a toggle for 'Monitor this Exception' and a 'Change History' button. Below this, the report is identified as 'LEVEL 0'. The current 'State' is 'Pending review', with a 'Share with DME' button. A yellow box highlights 'Identified Safety Breaches (2)', listing: 'Maximum 48 hours' average working time per week' and 'Maximum 72 hours worked in any 168-hour period'. Under 'Decision', there are three radio buttons: 'Select action(s)' (selected), 'No further action', and 'No further action'. The 'Select action(s)' option has three checkboxes: 'Fine for average weekly work limit breach', 'Fine for hours limit in a consecutive 168 hour period breach', and 'Recommend work schedule review'. At the bottom, there is a 'Comments for Doctor' field with a character count of 0/5000, and 'Cancel' and 'Submit' buttons.



Optional Action

Request Consent to Share with DME – Where educational components are identified within the exception report, the **GoSWH** can request consent from the **doctor** to share the report with the **DME**.

Required actions

The **GoSWH** must select the relevant action(s) as part of their decision.

The table below outlines the available actions for each exception reporting category.

Category	Available actions
Breaches of non-resident on-call patterns: Rest	Fine for continuous rest limit breach, and/or Fine for total rest limit breach, and/or Recommend work schedule review Or No action required
Inability to take contractual breaks	Fine for missed breaks breach, and/or Recommend work schedule review Or No action required
Raising concerns of a suspected non-compliant rota pattern	Fine for average weekly work limit breach, and/or Fine for hours limit in a consecutive 168-hour period breach, and/or Recommend work schedule review Or No action required
Inadequacy of clinical support	Review of supervision levels, and/or Recommend work schedule review Or No action required
Inadequacy of rostered skill mix	Skill mix review, and/or Recommend work schedule review Or No action required
Detriment or threat of detriment related to exception reporting	Investigation Or No action required
Information breach	Fine for information breach Or No action required

Submitting the decision

Comments for the **doctor** are required for all decisions other than **No further action**.

When the **GoSWH** submits their decision:

The exception report **state** is updated to **Reviewed**,

The **outcome is set** in line with the actions for the selected category.

The **change history** is updated accordingly.

The **doctor** is **notified** of the outcome and comments. (*Comments where relevant*).



Example for: **Raising concerns of a suspected uncompliant rota pattern**

Monitor this Exception Change History

LEVEL 0

State: Reviewed Share with DME

Identified Safety Breaches (2)

- Maximum 48 hours' average working time per week
- Maximum 72 hours worked in any 168-hour period

Outcome

- Fine for hours limit in consecutive 168 hours period breach [Add Fine Details](#)
- Recommend work schedule review

Note

Where the **GoSWH** recommends a work schedule review, this is managed outside the exception reporting process, in line with the reforms, as **Educational Supervisors** are no longer responsible for managing exception reports.



Request and Grant consent to share with DME

Where **educational** components are identified within the exception report, the **VM** or **GoSWH** can request the **doctor's** consent to share the report with the **DME**.

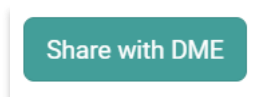
Request consent (VM, GoSWH)

Consent to share exception report information with the **DME** can be requested for the following exception reporting categories:

- An unscheduled early start
- An unscheduled late finish
- Breaches of non-resident on-call patterns: Hour
- Breaches of non-resident on-call patterns: Rest
- Inability to take contractual breaks
- Inadequacy of clinical support
- Inadequacy of rostered skill mix
- Raising concerns of a suspected non-compliant rota pattern

for submitted exception reports in any state **other than Rejected or Withdrawn**.

To request consent, the **Share with DME** option is available.



A reason is required when submitting the request.

A light blue form box with a title "Share with DME". Below the title is a text input field labeled "Reason *" with a character count "0/5000" on the right. At the bottom right of the form are two buttons: "Cancel" and "Obtain Consent".

The request and accompanying reason are recorded in the **change history**.

The **doctor is notified** when the consent request is sent.

Once requested, the exception report displays the following message:



Requested consent to share with DME

Grant consent (Doctor)

When responding to a request to share with the **DME**, the following information is displayed on the exception report for the **doctor** with **Grant consent** and **Deny consent** options.

Consent request to share with DME and their deputies

An educational component has been identified in this exception report. By consenting to share the details with the DME and their deputies, they will be able to review the case, address any missed educational opportunities, and determine whether further improvements to your training are required. (System will create a related exception report for review)

Deny Consent

Grant Consent

Once the **doctor** has responded:

The **doctor's** response is recorded in the **change history**.

Where consent is **granted**, the **DME** is **notified**.

In either case the **doctor's** response is displayed on the exception report:

Sharing consent granted

Or

Sharing consent denied



Exception report change history

A **change history** is available for all submitted exception reports and records all changes; comments and actions taken throughout the lifecycle of the exception report.

To view the **change history**, navigate to:

- **Dashboard** > select the submitted exception report > select **Change History**.



Change History
✕

Level 2

22 Jan 2026: 15:02

Action: Proceed with Payment by Mrs Verification Manager

22 Jan 2026: 15:01

Action: Reviewed by GOSWH: Payment and Fine for exceeding shift length by Dr Guardian of Safe Working Hours

Action Comment:

* Fine comment for doctor

21 Jan 2026: 20:47

Action: Information Confirmed - Instruct Verification Manager to proceed by Dr Guardian of Safe Working Hours

Level 1

21 Jan 2026: 20:33

Action: Escalate to Guardian of Safe Working Hours review stage by Mrs Verification Manager

Action Comment:

* The rota name provided does not match the location at which it is worked. Please advise

21 Jan 2026: 20:01

Action: Exception resubmitted with no changes by Dr Iain Banks

Level 0

21 Jan 2026: 18:18

Action: Clarification required - Proceed to Level 1 by Mrs Verification Manager

Action Comment:

* Please check the selected rota is correct.

21 Jan 2026: 18:15

Action: Exception submitted by Dr Iain Banks

The **Change History** option is **not** visible to the **doctor**.



General comments

All roles, **except the doctor**, can view and add comments to individual exception reports. **Doctors** can only view comments that have been made visible to them.

Comments can be added at any stage of the workflow.

Multiple comments can be added to support ongoing discussion and review.

Comments are not visible to the doctor by default; visibility must be explicitly selected when adding the comment.



Add and view comments

To add a comment, navigate to:

- **Dashboard** > select the submitted exception report > Scroll below the submitted exception report information.

Enter the comment and indicate whether it should be **visible to the doctor** and save.

To view comments, navigate to:

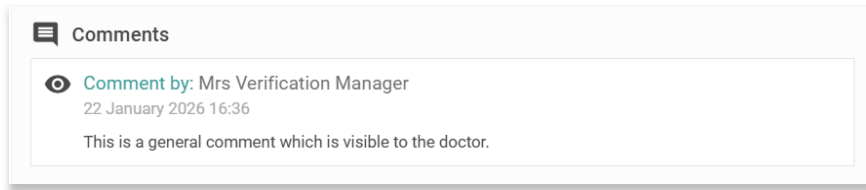
- **Dashboard** > select the submitted exception report > select **Go to Comments** at the top of the exception report.

[Go To Comments \(2\)](#)

- **Dashboard** > select the submitted exception report > Scroll below the submitted exception report information.



Example comment:



A visibility icon next to the comment, indicates if the **doctor** can see the comment or not.

Displayed if the comment is **visible to the doctor**:

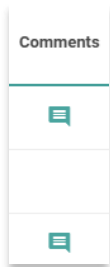


Displayed if **not visible to the doctor**:



Comments indicator on the exception report list

The **Comments** column on the exception report list, on the dashboard, indicates whether one or more comment exist for the exception report.



Manage fines (GoSWH)

Overview

The **GoSWH** can record fines in **Allocate Rota – Exception Reporting**, ensuring breaches are documented and managed in line with the exception reporting reforms.

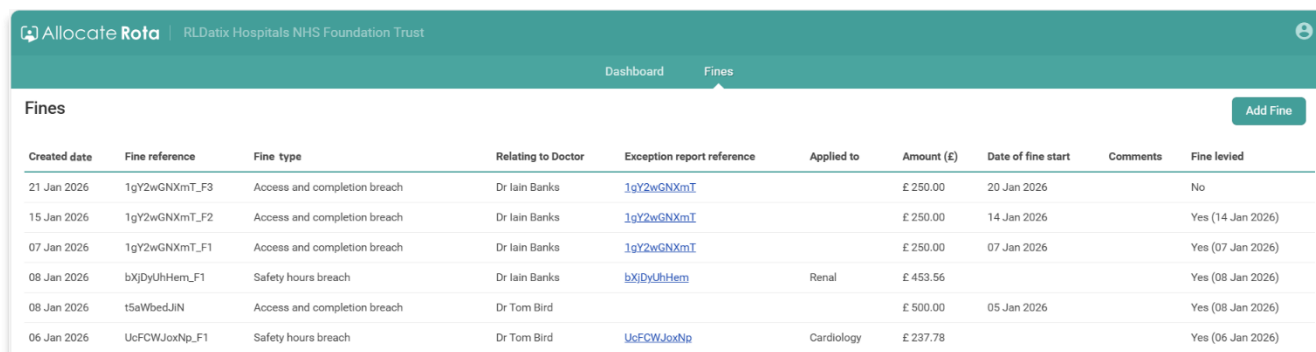
All fines are linked to exception reports where applicable.

The following types of fines can be recorded:

- Access and completion fines
- Safe working hours breach fines
- Information breach fines

Fines area

A new **Fines** menu option is available to the **GoSWH**. Selecting this option opens a dedicated fines area from where new fines can be recorded and where fines are listed.



Created date	Fine reference	Fine type	Relating to Doctor	Exception report reference	Applied to	Amount (£)	Date of fine start	Comments	Fine levied
21 Jan 2026	1gY2wGNXmT_F3	Access and completion breach	Dr Iain Banks	1gY2wGNXmT		£ 250.00	20 Jan 2026	No	
15 Jan 2026	1gY2wGNXmT_F2	Access and completion breach	Dr Iain Banks	1gY2wGNXmT		£ 250.00	14 Jan 2026	Yes (14 Jan 2026)	
07 Jan 2026	1gY2wGNXmT_F1	Access and completion breach	Dr Iain Banks	1gY2wGNXmT		£ 250.00	07 Jan 2026	Yes (07 Jan 2026)	
08 Jan 2026	bXjDyUjHem_F1	Safety hours breach	Dr Iain Banks	bXjDyUjHem	Renal	£ 453.56		Yes (08 Jan 2026)	
08 Jan 2026	tSaWbedJIN	Access and completion breach	Dr Tom Bird			£ 500.00	05 Jan 2026	Yes (08 Jan 2026)	
06 Jan 2026	UcFCWJoxNp_F1	Safety hours breach	Dr Tom Bird	UcFCWJoxNp	Cardiology	£ 237.78		Yes (06 Jan 2026)	

Fines are listed in date-created order (most recent first) with the following information:

- Created date**, a unique fine number.
- Fine reference**, a unique fine number.
- Fine type**, Access and Completion breach, Information breach, Safety Hours breach or Missed breaks on 25% of occasions.
- Relating to Doctor**, name of the doctor who the fine relates to.
- Exception report reference**, with a link to the exception report where applicable.
- Applied to**, the department / specialty the fine is applied to.
- Amount**, the amount of the fine.
- Date of fine start**, applicable for access and completion fines only.



- i. **Comments**, any comments that were added.
- j. **Fine levied**, displays **Yes** with the levy date or No.

A **Load more** option, located at the bottom right of the page, displays additional fines, if available.

Add a fine

Fines can be added by the **GoSWH** in two ways:

- Directly from the **Fines** area
- From within a submitted exception report

When a fine is saved, a unique fine reference is generated.

Where the fine is linked to an exception report, for the fine reference; the exception report reference and **_F1, _F2...** is appended to each fine linked to it.

Where a fine is not linked to an exception report i.e. for an access and completion test breach where the **doctor's** account is not set up, a unique reference like that of an exception report is generated.

Directly from the Fines area

A fine can be added from the fines area via the **Fines>Add Fine** option:



Selecting the option displays a form to complete with the following information:

- a. **Breach type**, selecting Access and Completion breach, Information breach, Safety Hours breach or Missed breaks on 25% of occasions is **mandatory**.
- b. **Breach subtype**, displayed for Safety hours breach, selecting one of the following subtypes is **mandatory**:
 - i. Maximum 13-hour shift,
 - ii. 11 hours' rest,
 - iii. Minimum 5 hours' continuous rest,
 - iv. Minimum 8 hours' total rest,
 - v. Maximum 72 hours in any 168-hour period,
 - vi. Maximum 48-hour average working week.
- c. **Doctor Name**, the **doctor's** name is **mandatory**, the following options are available:
 - i. Select a doctor from your organisation.
 - ii. Select a doctor that has left your organisation using the option: **Include doctors that have left the organization**.



- iii. Enter the doctor’s name for access and completion breach by selecting the option: **Doctor account not setup.**
- d. **Exception report reference**, selecting the exception report reference is **mandatory**, except for an access and completion breach where the doctor account is not setup.
- e. **Apply fine to**, selecting the department or speciality is **mandatory**, except for access and completion breaches.
- f. **Amount £**, fine amount is **mandatory**.
- g. **Date of fine start**, displayed for access and completion breach and is **mandatory**.
- h. **Comment**.
- i. **Fine levied**, selecting Yes or No is **mandatory**. If Yes is selected, then the **Date fine levied** is **mandatory**.



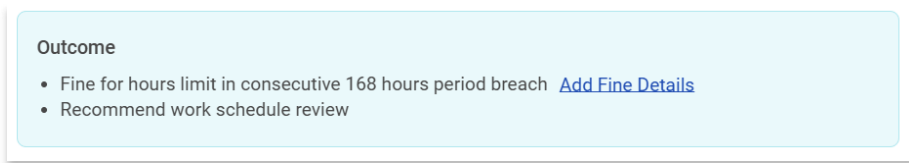
Note

The same fine cannot be added to an exception report more than once, except for an access and completion breach, where recurring fines may be applied every 7 days until the issue is resolved.



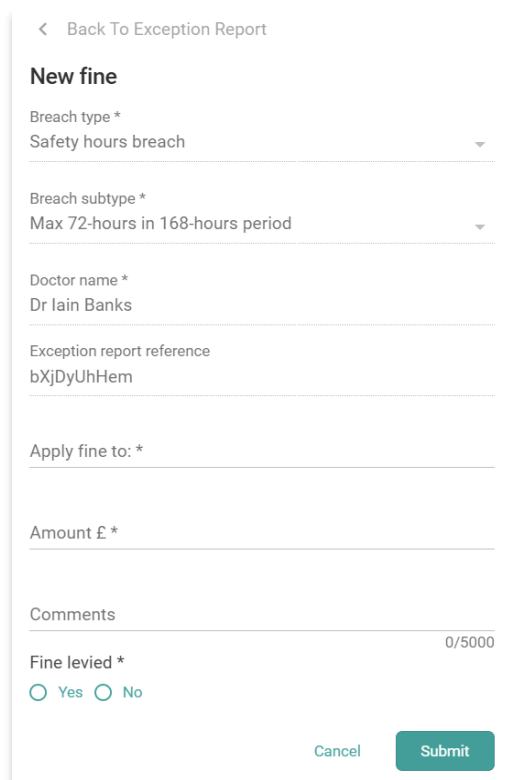
From within a submitted exception report

A fine can be added directly from a **submitted exception report** against a fine outcome via selecting the submitted exception report > **Outcome** > **Add Fine Details**.



The **Add Fine Details** option is available next to each fine outcome within the submitted exception report.

When **Add Fine Details** is selected, the **New fine** form is displayed and is **pre-populated with details** from the exception report.



The remaining **mandatory** details need to be completed before the fine can be saved: i.e.

- The specialty/department the fine is to be **applied to**
- The **fine amount**

After saving the fine, a link to the fine is added to the exception report. The link text displays the unique fine reference code. Selecting the link opens the fine details.



Outcome

- Fine for hours limit in consecutive 168 hours period breach [bXjDyUhHem_F1](#)
- Recommend work schedule review

For **Test** exception reports, where one or more fines of type **access and completion breach** have been created, a link to each fine is displayed on the exception report.

Monitor this Exception
[Change History](#)

LEVEL 0

State: Complete

Outcome

Resolved after 7 days

Additional Information

Rota name: Gen Med ST3+
Date resolved: 22 Jan 2026

Associated fines

[1gY2wGNXmT_F1](#)
[1gY2wGNXmT_F2](#)
[1gY2wGNXmT_F3](#)

Edit or Delete a fine

Edit a fine

Recorded fines can be edited by navigating to either:

- **Fines** > selecting the fine record from the list, or
- **Dashboard** > selecting the submitted exception report > selecting the **fine link**.

All fine details can be edited **except** the following:

- **Fine reference**,
- **Doctor**, where the fine is linked to an exception report,
- **Doctor account not set up** option.

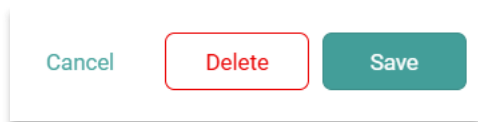
Delete a fine

Recorded fines can be deleted by navigating to either:

- **Fines** > selecting the fine record from the list, or
- **Dashboard** > selecting the submitted exception report > selecting the **fine link**.

The Delete option is available on the bottom right of the fine record:





A confirmation message is displayed prior to deleting the fine record.



Notifications

The following notifications are sent as part of the new processes and workflows to support the exception reporting reforms:

General

Exception report submission confirmation (**sent to doctor**)

Doctor submits an exception report (**sent to relevant actioner**)

Out-of-time-frame submissions (**sent to GoSWH**)

Safety breaches identified (**sent to GoSWH**)

Outcome(s) of exception report submission – except rejected (**sent to doctor**)

Access issue

Doctor submits an exception report for access issue (**sent to GoSWH**)

Access Issue ticket resolution (**sent to doctor**)

Additional hours notifications

VM confirms additional hours exception report for Payment or TOIL (**sent to doctor**)

VM cannot confirm overtime exception report- incomplete/inaccurate – Level1 (**sent to doctor**)

Doctor resubmits the exception report after clarification – Level1 (**sent to VM**)

VM cannot confirm overtime exception report- incomplete/inaccurate - Level 2 (**sent to GoSWH**)

GoSWH confirms additional hours exception report – Level 2 (**sent to VM**)

TOIL is mandated (**sent to doctor**)

TOIL is mandated (**sent to GoSWH**)

Additional hours reviewed by GoSWH (**sent to doctor**)

GoSWH reject exception report - Level 2 (**sent to doctor**)

Consent to share with DME

Consent requests from actioners (**sent to doctor**)

Exception report generated for Educational components (**sent to doctor**)

Exception report generated for Educational components (**sent to DME**)



Workflows- Stages, States and Outcomes

Access and Completion tests

Stage:	Level 0
Decision maker	Guardian of Safe Working Hours (GoSWH)
States	<ul style="list-style-type: none"> Pending resolution Complete Withdrawn
Outcomes	<ul style="list-style-type: none"> Resolved within 7 days, Rota name and Date resolved Resolved after 7 days, Rota name and Date resolved Fine(s) No further action



Additional hours

Stage:	Level 0	Level 1 (Clarification)	Level 2 (Escalated)
Decision maker	Verification Manager (VM), GoSWH if necessary	Verification Manager (VM), GoSWH if necessary	Guardian of Safe Working Hours (GoSWH)
States	Draft	Pending review	Pending review
	Pending review	Pending clarification	Approved
	Approved	Approved	Confirmed by GoSWH
	Complete	Complete	Complete
	Approved (Reviewed by GoSWH)	Approved (Reviewed by GoSWH)	Approved (Reviewed by GoSWH)
	Complete (Reviewed by GoSWH)	Complete (Reviewed by GoSWH)	Complete (Reviewed by GoSWH)
	Withdrawn	Withdrawn	Rejected
		Withdrawn	
Outcomes	Payment	Payment	Payment
	TOIL	TOIL	TOIL
	Recommend work schedule review*	Recommend work schedule review*	Recommend work schedule review*
	Fine(s)*	Fine(s)*	Fine(s)*
	No further action	No further action	No further action

* Additional outcomes available when the **GoSWH** reviews an exception report after it is **Approved**, **Complete**, or **Confirmed** by them.



Educational

Stage:	Level 0
Decision maker	Director of Medical Education (DME)
States	<ul style="list-style-type: none"> Draft Pending review Complete Withdrawn Rejected
Outcomes	<ul style="list-style-type: none"> Replaced Reinstated Recommend work schedule review No further action

Guardian (Other categories)

Stage	Level 0
Decision maker	Guardian of Safe Working Hours
States	<ul style="list-style-type: none"> Draft Pending review Reviewed Withdraw
Outcomes	<ul style="list-style-type: none"> Review of supervision levels, for category Inadequacy of clinical support Skill mix review, for category Inadequacy of clinical support Investigation, for category Inadequacy of Detriment or threat of detriment related to exception reporting Recommend work schedule review Fine(s), if applicable for the relevant to category No further action



General updates

Trust Policy

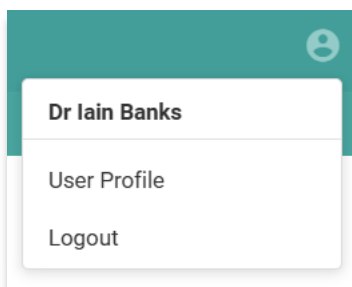
All users can download and view the trust policy document from the old dashboard and new dashboard via the **Download Trust Policy** link, if one has been uploaded by the administrator:

 [Download Trust Policy](#)

User profile and Log out

The following information and actions have been moved to the **user menu** (user icon):

- The **name of the logged-in user**
- Access to the **user profile** for managing username and password
- The **Logout** option



Settings

The **Settings** area available to the **Trust Administrator**, has been updated to remove configuration options related to the **old exception reporting form**.

The following message is displayed where configurations apply only to the old exception reporting process and dashboard:

These configurations apply to the old exception reporting process and dashboards only.

