

Case Example Title	Partnership working between clinicians and managers to re-design services to improve low morale in junior doctors.
Trust (& Site) name	Bristol Heart Institute as part of the Severn Region cardiology training programme.
Background and initial problem	<p>Poor satisfaction in training.</p> <p>The Severn Region cardiology training programme generated poor results in the General Medical Council (GMC) trainee survey, with the lowest overall satisfaction nationally for three years running. As a result we carried out a full cardiology programme review in the Severn Region of the South West with contribution from the Royal College of Physicians and we spoke to trainees from all seven trusts within the programme. At the meeting in November 2014 it became apparent that the majority of concerns centred on the training environment at the Bristol Heart Institute (BHI).</p> <p>Relevance to junior doctors' morale comes from the NHS Constitution's 3rd Principle: <i>'Respect, dignity, compassion and care should be at the core of how patients and staff are treated - not only because that is the right thing to do - but because patient safety, experience and outcomes are all improved when staff are valued, empowered and supported'</i>.</p> <p>Health Education England's 2016 listening exercise on improving working conditions for Junior Doctors https://www.hee.nhs.uk/sites/default/files/documents/Appendix%20A%20-%20HEE%20Junior%20Doctor%20Morale%20Listening%20Exercise.pdf identified opportunities that fall broadly into three themes:</p> <ol style="list-style-type: none"> 1. <i>Being supported</i>: for training, service provision and individual career aspirations 2. <i>Feeling valued</i>: by clinical and non-clinical staff 3. <i>Having autonomy</i>: through greater involvement in decisions relating to their working and personal lives. <p>Health Education England collected this case example and we believe it addresses themes 1& 2 above.</p>
Specific aims and objectives	<p>Our aim was to improve GMC survey results for higher training in cardiology in Severn Region, in particular satisfaction levels. An improved educational environment would feed through to improved quality of patient care.</p>

<p>Process</p>	<p>A feedback session was held with the key educational staff at the BHI and a number of actions were agreed to be implemented including:</p> <ul style="list-style-type: none"> - the establishment and implementation of cardiology referral guidelines; - the appointment of additional non-medical staff to carry out echocardiograms; - improvements in consultant supervision; - the re-establishment of a teaching programme; - rota changes to the junior doctors on the cardiology ward to reduce the work burden of the cardiology registrar.
<p>Challenges</p>	<p>The success seen within the improvement of the educational environment in cardiology was achieved by the collaboration between the Director of Medical Education and key leads in the division within which the specialty sites. Having a joint partnership in leading the division consisting of a clinician and a manager contributes to the effectiveness of implementing change. Also having a Lead Clinician for Education with time in their job plan enables change to be implemented successfully.</p> <p>Despite an investment in allied health professionals contributing to the delivery of patient care, the significant shortfall in funded educational placements in the acute sector, operational pressures within emergency services and the implementation of the new doctors' contract, continue to be extremely challenging.</p>
<p>Outcome, impact and learning</p>	<p>In 2016 the Severn Region cardiology training programme was the number one training programme nationally in the GMC trainee survey for overall satisfaction, demonstrating the impact of the review and the Trust's commitment to improving the training environment.</p> <p>A follow up visit 7 months after the review enabled us to hear directly from the trainees about the impact of the above plan. The Trust has delivered the actions and invested heavily in supporting the educational environment and the trainees recognised significant improvements. The trainees described a supportive educational environment and appreciated the clinical experience and education, as well as recognising improved clinical care and patient safety.</p>
<p>Next-steps & sustainability</p>	<p>Yearly review of the GMC survey results, maintaining a Lead Clinician for Education and on-going divisional lead partnership working between clinicians and managers.</p>

**Further
information**

Dr Jon Francis - Associate Dean Quality Severn HEE South West.
Health Education England,
Deanery House
Unit D - Vantage Business Park
Old Gloucester Road
Bristol. BS16 1GW
Jon.Francis@hee.nhs.uk 01454 252676