

## Building a culture of engagement with doctors in training

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### Imperial College Healthcare NHS Trust

#### What was the problem?

Engaging junior doctors poses particular challenges, especially due to the short nature of rotations. Yet engaging with medical staff brings numerous benefits: doctors enjoy increased job satisfaction and reduced burnout; organisations see improved quality and safety outcomes and less absenteeism; the patient's experience and quality of care improve. In addition, it was important to engage junior doctors to make sure they were well informed about their new contract.

#### What was the solution?

Before implementing the junior doctors' new contract in 2016, Imperial College Healthcare NHS Trust set out to improve trust and engagement through frequent and transparent communication with junior doctors.

**Junior doctor representative posts in the division of medicine:** The trust set up four junior doctor representative posts in the division of medicine and integrated care. These pay junior doctors £3,000 a year to improve engagement and contribute their expertise to decision-making. The representatives attend the divisional management committee and quality and safety committee, and have equal status with all other members. Applications have increased each time the role is advertised. Numbers in post vary with a mixture of grades, specialties and sites. Postholders must come from specialties within the division and be with the trust for at least nine months, to get the most from the role. Projects they have been involved with include:

- rota redesign to support a new acute medical model at St Mary's Hospital
- pathway redesign to support the removal of acute medicine from Hammersmith Hospital

- improving infection, prevention and control
- redesigning the senior house officer rota at Charing Cross Hospital
- pilot to improve the quality of clinical coding
- providing more support for patients who raise concerns via the Patient Advice and Liaison Service.

Although the trust could have implemented some of these projects without a junior doctor representative, it believes that planning and implementing such complex change was more successful as a result.

**Chief executive sessions for all staff:** The trust holds these one-hour sessions every month at four of its sites so that staff at all levels can meet the chief executive and executive team members, hear about current priorities and hot topics, and ask questions about issues that matter to them. The trust also updates staff on issues raised at previous meetings. All staff are sent a monthly leadership briefing in which the chief executive outlines hot topics and recent board papers. Posters across the trust outline the organisational structure.

**Junior doctors' induction:** The guardian of safe working or associate medical director for medical education attends junior doctor inductions to provide an overview of the new contract and the exception-reporting process.

## What were the challenges?

Given the short nature of rotations, it can be challenging to engage with junior doctors. The trust communicates through many channels to keep junior doctors up to date, including e-mails, the intranet, rolling screensavers, posters and attending junior doctor inductions/teaching sessions.

## What were the results?

The trust believes these steps helped create a sense of belonging to the organisation and gave junior doctors a voice. The representative posts have allowed them to raise concerns at the division of medicine's monthly board meetings.

## What were the learning points?

By improving junior doctor engagement and maintaining dialogue with their representatives, the trust showed it listened to and acted on their concerns.

## Next steps and sustainability

The trust intends to continue trust-wide initiatives and events to maintain a culture of engagement with junior doctors.

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## Want to know more?

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