Paired learning: a peer-learning leadership development initiative for doctors and managers

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**Imperial College Healthcare NHS Trust and Guy’s and St Thomas’ NHS Foundation Trust**

What was the problem?

Junior doctors have a strong and immediate influence on their organisation’s performance, but are often unaware of wider organisational pressures. It is unusual for junior doctors to work alongside managers in a proactive and visible way, which misses opportunities to find new ideas, fresh perspectives and renewed energy for improving services. In the longer term, such experience can transform how doctors and managers see and understand each other’s roles and contributions.

What was the solution?

Imperial College Healthcare designed a paired learning pilot programme to ‘buddy up’ band 6 and 7 healthcare managers and specialist registrars to learn from each other’s expertise and experience and jointly improve services. Guy’s and St Thomas’ adapted the programme. The aim was to bring managers and junior doctors together to improve communication, peer-learning and understanding of each other’s roles and the impact each has on patient care.

The pilot scheme paired 17 healthcare managers with specialist registrars, and comprised five elements.

**Conversations:** Pairs were encouraged to find out more about their partner, to understand their role in the organisation and explore their perspectives on healthcare issues. Discussions were designed to stimulate learning, and lay foundations on which shadowing and project work could flourish.

**Shadowing:** Pairs were asked to create shadowing opportunities for each other to expand perspectives through exposure to real work-based situations. This included managers experiencing the clinical aspects of theatres, outpatient clinics, wards or emergency departments, even attending out-of-hours shifts and talking to patients. Clinicians could sit in on meetings about operational and strategic issues, including discussions about finance and performance – entirely novel for most clinicians. Pairs could discuss their expectations and potential learning before shadowing, then debrief and reflect on it afterwards. This made shadowing a deep learning experience rather than merely ‘interesting’.
Workshops: Managers and clinicians learned alongside each other in six facilitated workshops. These acknowledged potential differences in their learning needs, and emphasised developing skills and behaviour to lead change. This approach aimed to help participants make improvements in many different contexts. The workshops were based on:

- developing self-awareness and a shared purpose
- exploring the NHS context – quality, safety, finance, productivity and policy
- developing skills and tools for change
- designing services for quality and safety
- a ‘powerlab’ simulation – to explore working within systems
- sharing learning through project presentations.

Improvement work: Managers and clinicians worked together on a project to improve services for patients. They could either tackle the project together or use each other as a ‘critical friend’ to develop and improve. Although no resources were available for projects, participants could ask programme leads for specific support. Projects did not have to be completed before the programme ended, but it was important to reach milestones and be clear about next steps.

Design surgeries: Regular drop-in ‘design surgeries’, facilitated by one or two of the programme leads, enabled participants to discuss their project work informally with a small group of supportive colleagues.

What were the challenges?

The main challenge was the feeling that ‘we are all too busy’, but this type of programme can be flexible, light touch and designed around participants’ needs. The key components – conversations and shadowing – can be fitted in around everyone’s work pressures if there is ambition to do so.

At Guy’s and St Thomas’, senior support from the chief executive, medical director and director of improvement helped avoid some challenges. The programme had no budget, but was made possible by colleagues helping to design and deliver workshops and providing administrative support.

What were the results?

Imperial evaluated the pilot programme using qualitative and quantitative analysis of pre and post-programme questionnaires. Managers and clinicians felt more likely to proactively engage with each other to solve problems and improve services as a direct result of the programme. They also suggested they would take this learning with them throughout their careers.
A strong theme from the qualitative findings was how the programme broke down barriers between doctors and managers. Many doctors reported holding poor views of managers beforehand. They had little or no prior experience of working in partnership – or even communicating – with managers in their departments. Many managers reported they had rarely worked with doctors below consultant level and had not previously sought their input.

Clinician-manager teams at several healthcare organisations, including Great Ormond Street Hospital for Children NHS Foundation Trust, have now implemented paired learning.

**What were the learning points?**

The pilot supports the link between clinician-management engagement and organisational performance: improvements to the quality of patient care and operational efficiency of services occurred as a result of paired learning.

**Next steps and sustainability**

Imperial has continued to adapt paired learning, widening involvement to new consultants as well as registrars, managers from other corporate areas, nurses, therapists, pharmacists and other clinical staff, as well as commissioning managers. It hopes to run the programme across organisations.

Guy’s and St Thomas’ adapted Imperial’s pilot programme, opening it to band 5 managers and junior doctors from Foundation Years 1 and 2. The trust developed its own workshops and refined them based on participants’ feedback. Each of the three cohorts has grown in numbers. The programme links to trust-wide quality improvement work and education to ensure a standardised approach and help guarantee the sustainability of paired learning.

**Want to know more?**

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