

**Results** After the initial 4 months of FLM, FY1s that 'agree' or 'strongly agree' to being prepared for the leadership challenges of practice increased from 47% to 76%. Increases were observed in FY1s' confidence in leadership abilities (10%) and application of leadership skills (13%).

**Conclusions** Leadership programmes such as FLM can increase FY1s' self-rated preparedness. Trusts' Apprenticeship Levy offer the opportunity for similar programmes for all professions and levels; STEES also deliver a course bespoke to ward managers. Apprenticeships, therefore, offer a solution to establishing sustainable, targeted and locally delivered leadership programmes in a resource constrained NHS.

## The quality network for older adult mental health services could hugely benefit your service: a higher trainee's perspective

### 32 LEADING INNOVATION AND IMPROVEMENT

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10.1136/leader-2018-FMLM.32

The Royal College of Psychiatrists' Centre for Quality Improvement (CCQI) is responsible for working with healthcare organisations, including local NHS Trusts from all over the UK, to help promote the principles of quality improvement at the local levels. Hence, the CCQI has set up several Quality Networks (QNs) and Accreditation Services in order to help it achieve this ambition. One of the QNs that has been set up is the Quality Network for Old-Age Mental Health Services (QNOAMHS). The QN offers old-age mental health inpatient units an opportunity to have Developmental Peer Review Visits, which focus on quality improvement and learning within a warm, safe, friendly and non-judgmental environment. Member organisations provide clinicians, who then take part in these Developmental Peer Reviews all over the UK. This enables expertise to be shared and examples of poor patient care and patient safety issues to be identified, raised and remedied early, without needing to wait for the CQC inspection to take place. This is good for both patient care and professional development. There are also opportunities to develop clinical leadership skills for trainees and consultants through participating in the developmental peer review process. There are opportunities for member services to eventually gain accreditation, which demonstrates a degree of excellence and attention to detail that the organisation can be proud of. QNOAMHS also holds annual forums where pertinent topics within Old Age Psychiatry can be discussed and knowledge can be shared amongst clinicians. As a trainee, participating in the QNOAMHS developmental peer review and accreditation process taught me important leadership skills such as self-organisation, planning, managing time when chairing review panel meetings and delivering feedback which is honest but collaborative in its style, so that the cycle of continuous improvement prospers at all times.

## Leading the team to the highest quality patient care in a busy transplant unit

### 33 CARDIFF TRANSPLANT UNIT ADMISSION PROFORMA – A QUALITY IMPROVEMENT PROJECT

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10.1136/leader-2018-FMLM.33

A prospective transplant patient's work-up is a long and complex process. On the day of transplant, this information needs to be easily accessible and documented in one place. In an evolving environment, healthcare management is becoming a more individual process. Typical issues that became evident at morbidity and mortality meetings were that individual pre-operative concerns were not always highlighted at the time of admission. The published directorate protocol was not being fully initiated. Important discussions regarding donor risk to the patient were being written on pieces of paper, which could be easily lost. Our aim was to produce a document where the admitting doctor could input all of the up-to-date essential information into a single resource. The document included a full clerking of current state of health, background, past medical history, current medications and a pre-operative examination. Any concerns or management plans discussed by the transplant multi-disciplinary team (MDT) at the time of activation onto the transplant waiting list were given a place to be documented. Potential individual complications from the donor's history were given a clear, defined place in the notes. A checklist was placed so that the department's protocol was followed in its entirety. The proforma is currently in use on the Cardiff Transplant Unit. Leading the team by implementing a centralised document has enabled effective communication of key information to all relevant members of the team. This has helped to ensure that patient safety is optimised. The main message we would like to convey is the fact that a comprehensive admission proforma can aid in effective handover and communication, along with continuity of care and clarity of information. The proforma has streamlined the admission process, making the overall experience for the patients much more organised and straightforward, factors which are vital in an understandably anxiety-provoking time of their lives.

## Leading innovation and improvement through perioperative medicine

### 34 THE NORTH WEST PERIOPERATIVE MEDICINE STUDY DAY

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10.1136/leader-2018-FMLM.34

High risk surgical patients undergoing major surgery in the NHS are known to have a disproportionately high mortality. The field of perioperative medicine hopes to tackle this issue by delivering integrated, multidisciplinary and patient centred care for patients throughout their surgical journey. A regional study day was organised and delivered by a small group of motivated junior doctors, with the support of a consultant