

Leading Innovation and Improvement

47 #INFLUENCEME: AN INVESTIGATION INTO SOCIAL MEDIA HEALTH INFLUENCERS AND THE IMPACT THEY HAVE ON THEIR FOLLOWERS

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Social Media Health Influencers (SMHIs) can be defined at the most basic level as those who influence their followers' perspectives by posting online health-related content. SMHI followers are individuals who watch, take advice from or subscribe to an SMHI.

This study aimed to investigate SMHIs' effect on their followers and explore the responsibilities of SMHIs in the online space and their capacity to enhance health education.

Primary data collection involved surveying individuals to understand the effect of SMHIs. Furthermore, the research team launched the National Collaborative for Health and Social Media (NCHSM), which aims to facilitate future research and raise awareness about issues surrounding social media and health. The NCHSM hosted '#InfluenceMe: The Responsibility of Online Social Power in Wellbeing', where a panel of SMHIs discussed the challenges of operating responsibly on social media.

Of the sample surveyed (n=206), 68 participants were identified as SMHI followers. 63% of SMHI followers reported changing a decision or action due to SMHIs, suggesting SMHIs may influence followers' health-related decisions or actions. Key differences between followers that changed behaviours based on SMHI advice and those that did not, included the number of SMHIs followed and how often health content was viewed. Followers were also keen for healthcare organisations to use SMHIs in health education. However, the #InfluenceMe event suggested that healthcare leaders (e.g. senior Healthcare Professionals) are needed to verify SMHIs and ensure their social media content is accurate.

SMHIs appear to have an impact on their followers' behaviours. In order to elicit positive behaviour changes in followers, SMHIs must create accurate content and act responsibly online. Healthcare leaders have the potential to verify SMHIs so that their involvement in health education is optimal. Healthcare leaders themselves also have potential to act as SMHIs in today's digital age.

48 A QUALITY IMPROVEMENT PROJECT LED BY TWO FOUNDATION DOCTORS AIMING TO IMPROVE THE QUALITY OF ACTIONS TAKEN FOLLOWING AN INPATIENT FALL ON DAVENPORT AND ROSEWOOD WARDS, THE MEADOWS

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Objectives Our aim was to run a successful quality improvement project and improve patient care over two inpatient wards at The Meadows Community Psychiatric Hospital, Stockport.

Background There is an average of 38,000 falls each year in community hospitals across the UK which Results in high levels of morbidity and mortality. We noted that the quality of post-falls reviews taking place by doctors at The Meadows varied greatly and were often not meeting NICE guidance on multifactorial risk assessments for falls, potentially leading to patient harm.

Methods Initially, we reviewed 34 inpatient falls by retrospectively analysing patients' notes in January 2018. Following this a post-falls pro forma was designed and implemented to guide doctors when performing their reviews. Feedback was collected, education sessions delivered and changes made accordingly. We then reviewed a further 20 falls on the same wards over March-April 2019 and improvements over 11 NICE standards were recorded.

Results The quality and consistency of falls reviews improved in all but 1 of the 11 NICE standards and 5 categories achieved 100%. These included receiving a medical assessment < 12 hours post fall, sending for a CT head if appropriate, performing neurovascular and cardiovascular examinations and recording medical observations post-fall. In addition, 85% now met the standard of having a medication review as part of the intervention to prevent further falls when using the pro forma (compared to 24% when the project started.)

Conclusion Our project highlights that junior doctors can effectively lead and manage a successful project to improve patient care. Despite our junior status within the team, we were able to implement strong leadership and management skills and are currently expanding the project from its original objective to a Trust-wide project, reflecting its success.

49 A TRAINEE LED QUALITY IMPROVEMENT PROJECT TO INCREASE SATISFACTION OF JUNIOR DOCTORS IN A HIGH VOLUME NEUROSURGICAL UNIT

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The Department of Neurosurgery in Oxford University Hospitals NHS Foundation Trust is a tertiary referral centre which treats approximately 1500 neurosurgery inpatients per year. Feedback from junior doctors in the General Medical Council (GMC) National Training Survey 2018 revealed low rates of trainee satisfaction.

To investigate the underlying cause, an anonymous online questionnaire was designed which collected data on various aspects of junior doctors' experience in the department.

Questionnaire responses from 12 out of 16 junior doctors identified problems with frequent overtime work, excessive administrative tasks, lack of protected training opportunities and variable levels of senior supervision on the ward. To reduce overtime working, the rota was redesigned to improve staffing levels in afternoons/evenings and a formal handover meeting was introduced. A departmental teaching programme with weekly seminars on the management of neurosurgical conditions and neuroanatomy was developed. This was supported by the introduction of a neurosurgery curriculum aimed specifically at junior doctors. The role of a 'Ward Registrar' was enhanced to provide