

Leading Innovation and improvement

47 DOCTORS ADMINISTRATORS A NOVEL ADDITION TO THE NON-MEDICAL WORKFORCE

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Introduction We describe a project to introduce a novel non-medical role to support Medical staff, the 'Doctors administrator', and to improve the quality and timeliness of the final discharge summary letter (DSL) being sent to primary care teams. A bespoke training program was developed which included, ward clerk duties, typing, medical terminology and coding.

DAs were trained to produce DSLs, which consultants then verified or amended electronically, before forwarding to the GP.

Pilot phase: 6 months

3WTE DAs produced 260 DSL each month. Two consultants acted as supervisors. This relationship was key to building confidence and capability and to ensure high quality of the letters.

A very early quality indicator was the percentage of letters typed within 3 Days.

Letter typed within 3 days% by consultant

- PRE – DA • POST –DA
- Consultant A • 55.4% • 67.6%
- Consultant B • 8.6% • 71.2%

Full implementation DA's now act on behalf of 13+ consultants producing over 550 DSL monthly. Assuming each DSL takes around 15 minutes, we estimate DA's save around 120 hours consultant time monthly. A standardised format ensures key information is not omitted facilitating more accurate coding and data collection.

Consultants and DAs are highly satisfied. Consultants felt there was less burden of basic admin tasks. 'the time I now spend on admin has significantly reduced and is much more structured'

Feedback from GP's was positive and improved timeliness of communication had been observed.

Safety There have been 3 Clinical incidents recorded during the whole period, both related to onward results/referral management. All incidents were investigated and safeguarding actions put in place e.g. copying of onward referrals to specialist's teams.

Conclusions Doctors administrators are safe and effective and reduce clinical workload. Whilst we have utilised this resource for DSL for we believe this role could be expanded and developed in other clinical contexts.

48 THE SIGNPOST PROJECT- USING TECHNOLOGY TO IMPROVE AWARENESS OF TRAINING OPPORTUNITIES AND SUPPORT FOR DOCTORS IN TRAINING

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Challenging workplaces contribute to low morale & decreased recruitment of doctors into training programmes. Our deanery's 'VALUED' initiatives aim to improve trainee engagement, support & retain doctors in training. Initiatives receive positive feedback, but lack of awareness of opportunities through suboptimal publicity, may contribute to feelings of being undervalued, identified by 62% of obstetric trainees. The Signpost Project, involving educators, administrative, IT staff and trainee representatives, aims to publicise professional development & support opportunities using a digital tool.

Focus groups quantified trainees' baseline awareness of training opportunities, qualified their support & information needs using thematic analysis & considered preferred communication methods. Stakeholders were approached to understand their current roles & secure project involvement. We created a prototype digital communication tool, publicising opportunities within the obstetric specialty, using a mobile website. Content, functionality & global score for increasing awareness of opportunities/support was explored during 3 improvement cycles. Administrative teams and educators were involved in assessing workload burden. We evaluated the tool's impact on trainee feeling of value at project completion. Scalability to other specialties was evaluated. A specification list included all user requirements.

Improvement cycles showed increasing satisfaction with content, function & evidenced improved awareness of opportunities & support. Workload burden review highlighted administrative efficiencies. On project completion, 71% of trainee participants reported they felt valued by the deanery (Baseline 38%) Scalability results showed 100% respondents felt this tool would strengthen communication within their specialty.

Technology can enhance trainees' awareness of opportunities, increase their feeling of value & align with organisational aims to support and retain doctors in training.

Developing effective leaders

49 THE TRAINEE AMBASSADOR SCHEME: CREATING A SUPPORTIVE LEADERSHIP COMMUNITY RESPONSIVE TO TRAINEE DOCTORS NEEDS IN THE NORTHERN IRELAND DEANERY

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Collective leadership is required to transform healthcare. Challenging workplace environments contribute to low workplace morale & decreased recruitment of doctors into training. NIMDTA developed this scheme to create distinctive, supportive leadership training responsive to trainee needs, which aligns with NIMDTA strategy to attract & retain doctors in training. This 'alongside clinical' programme was trainee directed, led by a leadership fellow & supported by NIMDTA educationalists. Leadership training was tailored to participants learning needs & projects developed based on issues identified by trainees. NIMDTA educational teams attended meetings, developing Ambassadors' understanding of organisational