Frontline staff are uniquely placed to lead in identifying gaps in the healthcare system and develop solutions. Unfortunately many entrepreneurial clinicians must choose between their training and systems improvement. Our study investigates the perceptions and impact of the NHS encouraging entrepreneurship from within its own ranks.

A systematic literature review assessed the cause and extent of the challenge. A quantitative questionnaire evaluated the views of 161 frontline HCPs including students. Seven key themes were investigated including potential benefits of entrepreneurship, awareness of programmes, and support for entrepreneurship in medical training and education.

Respondents agreed on the potential for entrepreneurship to bring about ‘reduction of healthcare costs’ and ‘improved efficiency of healthcare delivery’ across all demographics. Increased distrust of HCPs was highlighted as a drawback, as was fear of ‘financial risk’ and ‘potential brain drain’. Lack of formal infrastructure was described as leading to an increased complexity of career development pathway, and an increased risk of burnout. 52% of respondents were not aware of any of the listed entrepreneurial programmes, supporting our preliminary literature findings of low awareness. When considering who should support HCP entrepreneurs, the majority of doctors indicated a preference for it to come from the NHS alone (79%). Many students recognised the importance of entrepreneurship, yet had limited exposure and agreed that further support and education should be provided in medical schools to develop their skills for their future work as doctors.

Implementation presents a challenge because collaboration is notoriously difficult in a fragmented system. Further research is required to build on our investigations but overall we found that the NHS could unlock many benefits if it were to encourage entrepreneurship from within its own ranks and propose recommendations for its future enablement.
demonstrated through organisation and administration of the channel. We are on Plan-Do-Study-Act (PDSA) cycle 1 and will shortly commence evaluation of our intervention.

**Conclusions**

We anticipate our intervention will gradually improve wound photography compliance in open fracture patients following continued PDSA cycles. Our devised photography process can be applied for other clinical indications within various specialities.

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**Testing, implementation, spread and scale up of high quality and innovative healthcare improvement approach for patient safety**

**METHODOLOGY**

COMBINING MODEL OF IMPROVEMENT WITH LEAN METHODOLOGY

Gautam Sharma. Hamad Healthcare Quality Institute – Hamad Medical Corporation, Qatar

10.1136/leader-2020-FMLM.172

**Background**

One of the innovative approaches implemented at Hamad General Hospital (HGH) for effective healthcare quality improvement was combining different quality improvement methodologies and tools for improving the care process and achieving patient safety. To test this approach, Lean and Model of Improvement with PDSA methodologies were combined for reducing the delay in IV stat administration.

**Approach**

Tested an innovative idea for a 6-month intervention with a 6-month data collection period in a pilot-test site of inpatient medical ward. Intervention was implemented by a multidisciplinary team and involved study of existing process, removing superfluous tasks through lean technique, using fish bone and Pareto analysis for decision making, testing and implementing change ideas using Model of Improvement and PDSA methodology. Appropriate and need-based training was provided to staff involved in the process for sustenance of the improvement. The lessons learnt were spread to other medical units and scaled-up to other Hospitals of HMC across Qatar.

**Results**

The outcome measures in terms of total mean delay in stat delivery time was well within target time of 30 minutes as set by the hospital guidelines. The previous mean time was 2 hours 20 minutes. The results were sustained in the pilot unit for 12 weeks before they were spread to other units.

**Conclusion**

Combining Lean and model of improvement methodology can significantly contribute to better safety outcome measures for a patient-centered care.

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**Leading innovation and improvement**

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**SPARSH – A NOVEL APPROACH TO HEALTH EDUCATION. BY THE MEDICAL STUDENTS, FOR THE COMMUNITY: REACHING OUT, BEYOND THE CLASSROOM**

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10.1136/leader-2020-FMLM.174

SPARSH (Students of Pinnamaneni to Achieve Awareness and reach out Social and Sustainable Health) is a non-profit voluntary organization started by medical students of Dr. PSIMS &RF, Andhra Pradesh, India. Started by four students who wanted to raise health awareness in the community, nurtured by Dr PSN Murthy, it rose into a dynamic medical student body dedicated to raise awareness on basic health issues through outreach campaigns for the past four years.

**Objectives**

1. Raising awareness on specific health issues rampant but generally ignored.
2. Fanning the spark of leadership qualities and communication skills in medic students.

**Themes**

1. Menstrual hygiene (2016): Menstrual hygiene; Raising awareness on taboos and issues regarding menstruation.
2. Breast Cancer (2017): Bust the myths on breast cancer and raising awareness about self breast examination; Mobilised mass hair donation for cancer survivors.