

Working with SHAs case study: Inspiring junior doctors for quality improvement

Overview

Dr Joanne Watson returned to Taunton and Somerset NHS Trust, following a year as a Health Foundation Quality Improvement Fellow, determined to influence the organisation's capacity and capability for improvement and change. Impressed by Salisbury NHS Trust's work to involve junior doctors in improvement work, she adopted their approach for a local programme. Now in its third year, the programme shows junior doctors they can improve the system they are working in and gives them the skills and support to make it happen.

Project details

In September 2009, Dr Watson asked Foundation One (F1) junior doctors to volunteer for an improvement project. Out of 32 doctors, ten stepped forward and began work in January 2010. For speed the group chose from a suggested list of improvement projects. Unanimously they wanted to work on improving the timeliness of discharge summaries. From the outset they were ambitious and pointed out that timeliness alone was not enough, the summaries had to convey the right information, this bold aim was set to be met by July 2010.

From here the group met every two weeks. They were taught basic improvement methodology and supported as they worked through their ideas. The team worked closely with IT to improve the electronic discharge summary and forged links with various groups across the hospital. They sought advice from GPs on what was needed in the discharge summary (key points included diagnosis and follow up arrangements must be clear with no abbreviations). From this they developed a Likert scale to grade the summaries and developed a process measure to make sure they had clarity on these points during senior ward rounds.

At the end of their F1 year, the doctors presented their work at a medical grand round meeting to which the whole executive board was invited, as well as surgeons and GPs. This plenary session was a memorable experience for the doctors and confirmed that they had made a significant impact at the hospital.

In 2010, benefiting from the experience of the pilot, Dr Watson further adapted the approach and rolled out a full-year programme to all the hospital's new F1 doctors. Everyone took part in basic improvement training but project participation remained voluntary. Around 75% of the 2010/11 F1s went on to participate in four projects.

Impact

The pilot project had a huge impact on the new e-discharge summary. It is now considered effective, efficient and user friendly. With the group's drive it was embedded quickly. Timeliness of the summaries is now at over 90% - within 24 hours of discharge. Their work established how to achieve high-quality summaries. It is easy to teach to new doctors and gives them a critical framework to use.

In the second year, three of the four groups successfully developed or even embedded their improvement projects. All groups presented their projects to the board, using a 'Dragon's Den' approach, where they responded to questions about the importance of their work and what they had learned. One group was less successful, not being able to gain traction on their project. They went on to share their experience and in doing so gave a picture of how challenging improvement work can be.

Learning

To start a programme for all F1 doctors is very ambitious. Try it out with a pilot and then build on the successes. Testing helps build confidence and means it is easier to make adaptations. You will need to build a network of people to support the work for the whole group of F1s to facilitate the different groups. By promoting the success of the pilot programme, it will be easier to engage the necessary professionals to support the next year's programme.

Resist the urge to intervene, to do the work for them. Typically junior doctors are highly motivated, intelligent people who are learning through doing. They will repeatedly raise the ambitions of the project and work things out for themselves often above what was expected.

Those who have been involved in this programme say it is valuable and rewarding, adding to their skills early on in their careers. Feedback from consultants at locations where the junior doctors are now placed suggest there is excellent potential to spread knowledge and inspiration for quality improvement with junior doctors as advocates.

This work has been spread to other acute Trusts within NHS South West, such that five offer similar programmes with spread planned in four more with this year's F1 doctors.