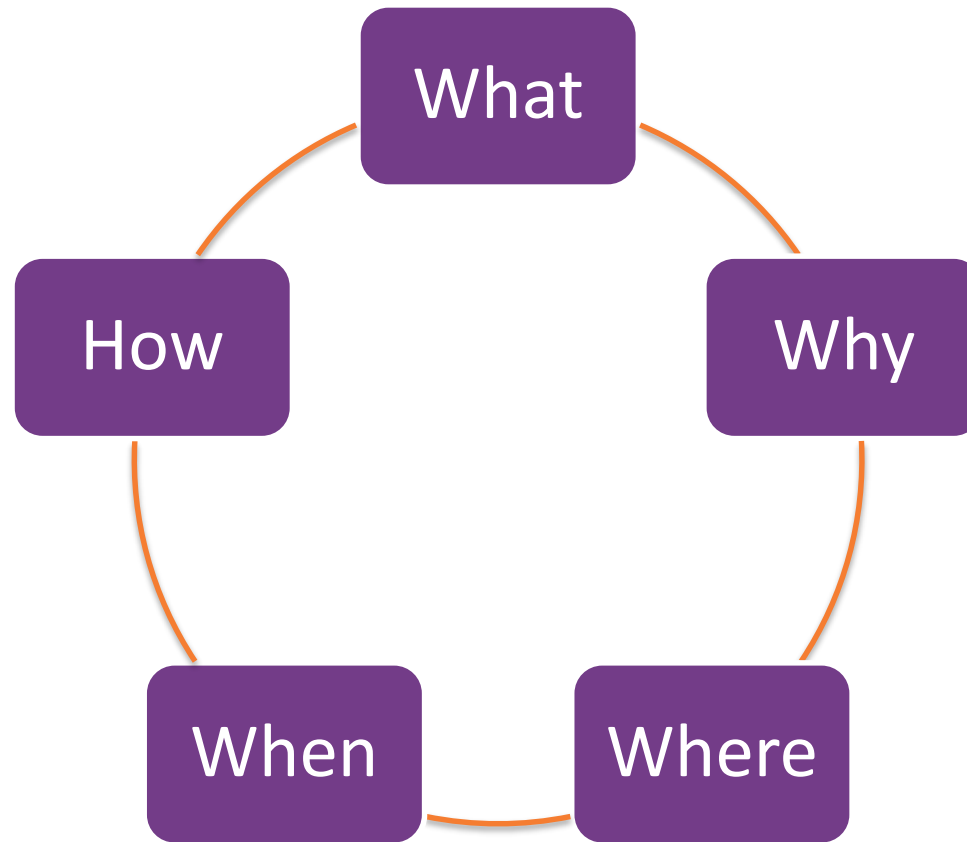


Medical Leadership: Getting Started?

Dr Tim Robbins

*Medical SpR, Warwick Hospital
Academic Clinical Fellow, Institute Digital Healthcare*




Case Study
Personal Journey

A personal journey

Accommodation representative to Brasenose College JCR
Pre-clinical representative to Oxford Society of Medicine
Regional Representative to Royal Society of Medicine
Student President: Royal Society of Medicine
UK Representative: WHO Continuing Cancer Care
National Student Survey Lead for Geriatric Medicine Society
Common Purpose Leadership Course
McKinsey Consulting Group Elective Programme

Junior doctor representative to Mortality Review Group
Hyponatraemia Guideline Lead - SWFT
Junior doctor representative to Patient Safety Committee
Future Hospital Commission Report
Health Education England BTBC Funding Winner
Chair, UHCW Trainee Leadership Group
Masters Modules Medical Leadership
Trainee Consent Course Lead
Winston Churchill Memorial Trust Award
E-Health Insider “Rising Star Award”



What

What is leadership?

Is medical leadership different?



TheKingsFund>



Why

Why engage in medical leadership?

Improve services for patients: locally, regionally & nationally

Improve training: locally, regionally & nationally



For recognition and (*targeted*) career advancement

To meet and engage with people and teams you usually wouldn't



How: National Case Study



Avoiding Grey Wednesdays

Trainee inspired, designed and delivered

Tim Robbins, Petra Hanson, Shirish Dubey

The Project

1

2012: Successful introduction of national pre-F1 shadowing week

2

Patient safety risks remain at mid-year rotation changes

3

£4540 HEE funding to improve rotation changeover

Pilot among 96 F1's in Coventry and Warwickshire Foundation School

All FY1's to spend a day shadowing the rotation they are moving onto next

FY1's supported to organise the shadowing day themselves over 2 month period

Data collected from FY1's with no shadowing and FY1's with shadowing

"Other F1s in other deaneries were jealous they had not had anything like this. They've said it would be really helpful"

Direct feedback from FY1 participant

n = 55

FY1's experiences of rotation change without shadowing



63%

Did *not* receive any handover of patients they would be caring for on starting second rotation



58%

Did *not* understand the roles and responsibilities of their second post on starting that post



51%

Did *not* feel prepared to start their second rotation

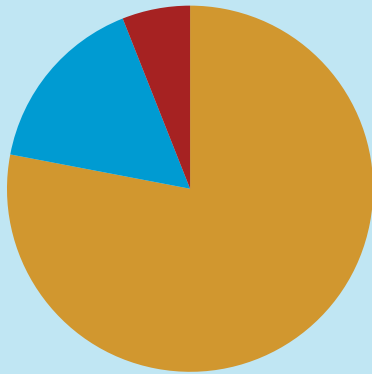


93%

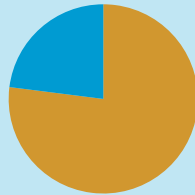
Would have liked the opportunity to spend time shadowing the post they will move to next

Clear evidence of benefit

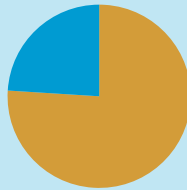
97% of F1s organised a shadowing day!



94% found shadowing day **very useful** or **useful**.



77% understood the roles and responsibilities of their second post
(83% increase) (P<0.05)



76% felt prepared to start their second rotation.
(55% increase) (P<0.05)

Improvements in the percentage of FY1's who:

- (1) Met their new team before starting
(42% increase)
- (2) Received a handover of patients
(25% increase)

Personal Stories

"Other F1s in other deaneries were jealous they had not had anything like this.
They've said it would be really helpful"

"This should be compulsory and part of the rota to ensure adequate handover
takes place"

"My London F1 [friends] were very
jealous of my shadowing day"

"Should be a
national thing"

"Great
Project"

"Serves as an ideal opportunity to
ask questions and meet the team"

"Was amazing for building confidence
and most importantly for patient safety"

"Really helped me feel more confident about starting my new job + to know the
little things that no one tells you about"

"Friends in other foundation schools felt unprepared and were jealous we were
able to shadow our next post which made us feel less apprehensive and nervous
about starting a new job"

Low cost of implementation

Cost	Amount	Reasoning
Foundation school admin costs	Minimal	Foundation programme co-ordinators exist, and would need to send ~3 emails to trainees using information already in existence
New page on e-portfolio	Minimal	Suitable pages already exist, simply an alteration to text needed. (Non essential cost)
Opportunity costs	Minimal	Trainees are “off ward” for 1 day per rotation yet significantly more prepared to start each rotation. Only taken when sufficient cover

In total: Near zero financial costs alongside an opportunity cost greatly outweighed by statistically significant benefits

When

GMC: Duties of a Doctor:

“You must make the care of your patient your first concern”

Medical Elective

Special Study Modules

Academic FY2 / ACFs

Out of Programme Activity

Part of core curricula

Study leave

Balanced with clinical practice



Where



WINSTON
CHURCHILL
MEMORIAL
TRUST





WARWICK
THE UNIVERSITY OF WARWICK

THANK YOU!

t.robbins@warwick.ac.uk



Warwick
Medical School

