RCP Chief Registrar Scheme

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Objectives

• Background RCP Chief Registrar (CR) Programme
• Current Projects
• What have the trust gained
• What have I gained
• Potential Pitfalls
• Learning from previous CR cohort
Background

• Future Hospital Commission’s vision of improving medical care by structuring services around the needs of patients.
• Underpinned by the 11 principles of patient care
• Recommended a new senior leadership role for doctors in training – the ‘chief registrar’
• A bridge between senior clinical leaders, managers and the junior doctor workforce
Progress to date

• Now in its second year, following a successful pilot in 2016/17
• 35 chief registrars in 2017/18
• Continued growth planned
• Vision: Chief registrar in every acute trust
About the role

- Min 12-month post for ST4 trainees and above
- Min 40% protected time for leadership and management
- In programme, OOPT or OOPE
- Local mentorship & support
- Enrolment on RCP development programme
RCP development programme

Over 10 months from September to June:

**Introductory event**
- 4 modules:
  - Quality improvement
  - Change management
  - Team development
  - Navigating the NHS

**Showcase event**

**Additional bitesize workshops**

**Sessions with NHS leaders/key figures**

**Speaking, networking, profile-raising opportunities**
Chief registrar priorities

- **Service improvement:** Using QI methodology and working with teams across boundaries
- **Engagement and morale:** Ensuring trainees feel valued and that their voice is heard
- **Workforce issues:** Working patterns, working conditions, workforce planning
- **Education and training:** Improving education, training and induction opportunities, and mentoring trainees
Examples of local initiatives

- Facilitating junior doctor forum
- Improving weekend discharge
- Establishing ambulatory care and ‘acute hospital at home’ services
- Redesigning pathways
- Medical handover and hospital at night
- Improving discharge summaries
- Coaching and mentoring trainees
- Renovating doctors’ mess and introducing ‘mess meetings’

“Patients no longer need to stay in hospital overnight”

“94% of junior doctors would now recommend their job to others (compared with 10% previously)”

“Demonstrable improvement in morale and perception of training quality”
Current Projects

• Introduction of Electronic Medical Take List
  – Increased efficiency
  – Increased reliability
  – Increased happiness

• Formalisation of Medical Handover
  – Development of formal structure
  – Dedicated handover room
  – Electronic handover
Current Projects

• Introduction of acute medicine clinics
  – To facilitate early discharge of patients from acute medical take and AMU
  – 5 appointments per day (Mon-Fri)
  – Soon expanding to 8 appointments per day
  – 93% felt it has enabled earlier discharged from the acute medical take
Current Projects

• Introduction of monthly registrar led F1 teaching sessions
  – Opportunity for F1s to present cases and have assessments completed
• Introduction of electronic prescribing
• Digital Dictation Pilot
• Organisation of medical rota
Current Projects

• Redesign of the current on call system for F1s
  – Addressing issues raised in exception reporting
  – Allow more time for clerking patients
  – Incorporate medical handover into rota

• Encourage juniors to become involved in QIPs
  – Linking in with transformation lead

• Junior Doctor Forums

• Mentoring junior doctors
What have the Trust Gained?

• “As Medical Director, I have found the Chief Registrar invaluable to collaborate with trainees in supporting their education and also providing very important input and support in developing clinical services within the organisation. A ‘must do’ for any Trust”.

Dr Alex Crowe - Medical Director, Warrington Hospital - April 2018
What have the Trust Gained?

- Link between senior management and junior doctors
- Junior Doctor input in senior management meetings
- Improved engagement
- QIPs implemented in timely manner
- Cost Savings attached to QIPs
- Improved morale
What Have I Learnt

• Improved understanding of:
  – NHS structure on both national and local level
  – Governance processes and risk management
  – Finances at departmental and Trust level
  – Practicalities of setting up a service

• Personal development
  – Time management skills
  – Leadership skills
What Have I Learnt

• Personal development:
  – Implementing successful QIPs
  – Implementing sustainable change
  – Team working and dynamics
  – Understanding of myself
    • Leadership style
    • Personality type
  – Resilience
Potential Pitfalls

• Difficulty getting started
  – No clear defined job description
  – What do I do?
• Taking on too much/Expecting too much of CR
• Negative connotations associated with the role
  – “Gone over to the dark side”
  – “Powerless”
  – “Big-headed”
  – Feeling lost
Potential Pitfalls

- Impact of on calls on CR time (if completing “In Programme”)
- Difficulty in measuring success
  - “What have you achieved?”
- Cost implications to the trust
- Limited time
Learning From Past Chief Registrars

• Chief Registrar time **must** be protected
• Need open door policy to senior management:
  – Medical Director
  – Assistant medical Director
  – CBU managers
  – HR Managers
  – Education department
  – Chief Executive
  – etc. etc.
Learning From Past Chief Registrars

- Trust needs to promote and support the role
- Consider multiple CR (across multiple specialities)
Evaluation

Findings:

• Positive impact on chief registrars and the individuals they work with

• Very strong evidence of personal development

• Enhanced engagement with senior clinical and managerial colleagues

• Improved morale

• Contributions to quality and service improvement

• Effective cross-team collaboration

Health Services Management Centre, University of Birmingham, 2017
Impact on chief registrars

“I feel like I can hold my own at senior meetings”

“I feel more prepared to take on the role of a hospital consultant as a result”

“I feel that I have a more nuanced view of leadership and its challenges, and a better understanding of my own limitations and strengths”

“I’ve developed skills that a clinical leader needs, such as engaging others in change, and identifying and capitalising on the strengths of a team”

“My leadership skills have developed immensely”
‘The chief registrar scheme transformed me into a senior leader with experience in leading teams and implementing QI projects.’

Yearbook and conference posters available at:
www.rcplondon.ac.uk/projects/outputs/chief-registrar-alumni

Chief registrar blog posts:
www.rcplondon.ac.uk/search/topic/chief-registrar/news-type/blog
How you can support the scheme

• Encourage trainees to apply for vacancies
• Encourage your organisation to recruit a chief registrar for 2019/20
• Engage with and support your local chief registrars

Resources available on RCP website:

- Recruitment information: Employing organisations and trainees
- Generic JD/PS
- Business case
- List of current appointments
Get in touch

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