The Chief Registrar Programme
3 years in

Orod Osanlou
Acting consultant in Clinical Pharmacology and Therapeutics
Former RCP chief registrar, 2016/17 cohort
Simple NHS structure!

The NHS: How the money flows

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Organisational Structure

- Chief Executive
- Quality & Improvement
- Medical
- Finance
- Corporate Development

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NHS Rushcliffe Clinical Commissioning Group

Staff structure

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Public Health England

Local authorities

Bett Fund

Public health

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https://www.rushcliffeccg.nhs.uk/your-ccg/our-team/

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500 years of medicine

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£3.4 billion¹

1. All figures are for 2016/17
2. Public health grant

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1. 1518
2. 2018

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Parliament
So where do junior doctors fit into this? How can we develop junior doctors with an interest in leadership? How can we provide the highest quality of care for patients?
Future Hospital Commission report (2013)

https://www.rcplondon.ac.uk/projects/outputs/future-hospital-commission
Bridging the gap
What was the Chief Registrar vision?
The role

- St4+
- 12-18 month post
- In or out of programme
- 40-50% protected time for leadership and management
- Bespoke RCP/FMLM development programme
The role

• Two way speed dial
• Support from mentor
• Presenting and networking opportunities
• Share good practice
• Learn from each other
• WhatsApp
• Alumni
Chief registrar: Broad themes

COORDINATION OF MEDICAL CARE
QUALITY AND SERVICE IMPROVEMENT
SERVICE RE-DESIGN
WORKFORCE TRANSFORMATION
EDUCATION AND TRAINING
Leadership development

- QI methodology
- Action learning sets
- Organisational change/leading change
- The role of a leader
- Engaging stakeholders
- Influencing others
- Managing challenging conversations
- Belbin’s team roles
- Building your team
- Emotional resilience
- Managing stress reactions
- Learning from experts
- Emotional intelligence
- Motivating teams
- Celebrating success
- Empowering others
- Role of a mentor
- Communication skills
- Presentation skills
- Online safety
## Metrics

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Chief Registrars</th>
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<tbody>
<tr>
<td>2016 - 2017</td>
<td>9………21</td>
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<td>2017 - 2018</td>
<td>36</td>
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<tr>
<td>2018 - 2019</td>
<td>56</td>
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<tr>
<td>2019 →</td>
<td>&gt; 103 expressions of interest</td>
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<td>Speciality</td>
<td>16/17</td>
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<td>----------------------------------</td>
<td>-------</td>
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<td>Cardiology</td>
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<td>Diabetes and endocrinology</td>
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<td>Haematology</td>
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<td>Nephrology</td>
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<td>Rehabilitation medicine</td>
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<tr>
<td>Respiratory</td>
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</tr>
<tr>
<td>Rheumatology</td>
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Example projects

Morale

• Refurbishing doctors mess
• Rota-redesign
• Free accommodation post nights
• Improving the working lives of junior doctors
• Junior doctor forums
• Xmas hampers for staff
• CMT breakfast club
• Reducing burnout
• Assessing and improving sleeping patterns among junior doctors
• Reducing junior doctor workload with clinical assistants
• Reducing blame
• Empowering doctors
Improving patient care

- Formalising handover
- Hospital at night
- Ambulatory care pathways
- Clinical pathways
- Referral pathways
- Clinical protocols
- Hospital at home service
- Improving MDT communication
- Improving discharge summaries
- Reduce rota gaps
- AMAU nurse led triage system development
- Staff redeployment
- Post foundation “fellowships” to reduce locum spend
- Improving intra-hospital transfers
Education and training

• Foundation teaching
• Core medical teaching
• Higher specialty teaching
• Journal clubs
• Outpatient clinics
• QI academy
• Inter-department referral systems
• Improving medical induction
• Simulation training
• Learning lessons from morbidity, mortality and clinical incidents
• Mentor scheme for CMTs
Patient flow

- Reducing length of stay
- Reducing ED breaches
- Reducing GP referral waiting times
- Pathways to reduce unnecessary admissions
- Reducing time to senior medical review
HealthTech

- Medical WhatsApp development
- Wearable technology
- Apps
- Virtual clinics
- Introducing intelligent integrated hospital software
- Paper free and sustainable healthcare
- Improving hospital IT systems
- Electronic documentation
Case studies
Ortus-iHealth

Virtual clinic platform

- Manage appointments
- Video consultations
- Clinician questionnaires
- Digital clinic letters
- Physical observation/symptom diaries
- Initial trial with cardiology and oncology
Outcomes

• DNA rate fallen from 11% to 3%
• MI pathway reviewing patients in 8 minute calls
• 500 extra patients a year seen due to extra capacity
• 97% of patients have saved time
• 33% have saved £10 or more
• 90% of patients satisfied with the virtual clinic experience
Tahir Akbar

Primary aim was to improve junior doctor morale

- Initiatives
  - Refurbished the doctors mess
  - Free accommodation for on-call teams
  - Mentorship for F1s
  - Improvements to CMT training
  - PACES teaching
  - Reducing rota gaps
  - Improving junior doctor induction
Results

- Within six months of the role, 94% would recommend their job to others from 10% initially.
- 80% reduction in one year comparative sickness rates (excluding long term sick).
- Trust stance from deanery changed ‘Red’ for ‘Amber’.
Amar Puttanna

- DIADEM project was devised to create individualised care plans for patients with DIAbetes and DEMentia
- Engagement with elderly care, acute medicine and senior nursing staff
- Prospectively reviewed 148 patients
- Roughly halved the number of medications prescribed
- Helped to reduce unnecessary hospital admissions
- Patient safety and cost saving implications
Ambulatory care clinic

- Facilitates discharge through early outpatient review
- GPs can refer to slot directly
- Improvement to patient flow
- Potential cost saving
E-handover

• E-handover is co-designed by clinicians and IT experts
• Web based software that intelligently links to other systems
• All handover in the 48 level one wards in trust now electronic
• Includes communication between doctors, nurses and pharmacists
• Improved quality of handover, fewer overall handovers, full audit trail, reduction in errors, improvement in patient safety, reduction in cardiac arrests (p=0.05)
• Shortlisted for a HSJ value award, 4 HSJ patient safety awards and an RCP Excellence in Patient Care Award
Cost savings

A new patient flow initiative at a large DGH

- Discharging more medical patients at weekends and bank holidays
- Identified barriers
- Engaged stakeholders
- Saved ~800 bed days/year
- Extrapolated theoretical saving > £175,000 p.a.
Independent evaluation

Professor Mark Exworthy
Iain Snelling

Health Services Management Centre, University of Birmingham

Published 2017:

www.rcplondon.ac.uk/projects/outputs/independent-evaluation-chief-registrar-scheme
What was found?

- 30% of week on CR (13 hours)
- 40-50% time liaising (junior doctors 25%, senior leaders 21%)
- 47% time quality improvement
- 27% time on education and training
- 20% time on operational issues
- Likely to have indirectly contributed to cost savings through quality/service improvement and improvements in patient safety
What has been achieved?

- Developed junior doctors as leaders
- Improved junior doctor morale
- Gave junior doctors a voice
- Service redesign
- Quality improvement
- Education and training
Chief registrars have continued to play a key role in service and quality improvement. ....... providing a bridge between senior clinical leaders, management and the wider trainee workforce means chief registrars are a valuable facilitator of staff engagement and collaboration for quality improvement across traditional silos.

Professor Jane Dacre, past President, Royal College of Physicians

‘On behalf of the RCP, I’d like to thank the chief registrars for their commitment to the role and their dedication to changing the NHS for the better.’

Dr Gerrard Phillips, past RCP senior censor / education and training vice president

“the chief registrar programme has helped form a new generation of trainees and new consultants who can be future leaders in the NHS”

Anonymous former chief registrar
The future

- The cost per place is £3,750.
- Over 100 expressions of interest to date for Chief Registrars in 2019/20
- Developing the medical leaders of the future
- Should soon start seeing previous Chief Registrars taking up senior management roles within trusts as consultants

Other programmes
If you are a junior doctor considering your next career step
If you are a clinical or trust manager considering hiring a Chief Registrar
Questions?

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