



# BTBC news

## Better Training Better Care

*From Patrick Mitchell, Director of National Programmes*

As we come to the end of 2013, it's great to reflect on what the team, our pilot sites and our partner organisations have achieved over the last 12 months. Our current workstreams have shown continued progression and I am really pleased that so many people have now heard the BTBC story. The feedback from the pilots starts to tell a great story of improving trainee and trainer experience as per the Temple Mantra, but more encouragingly have shown patient safety improvements and the realisation of cost savings and efficiencies. Not a surprise to those in the medical education community but a new world to the large majority who are not. We have a new story to tell and the HEE Board have been keen to listen. As we start to make things happen and roll out our adoptability strategy in 2014 I believe that we will continue to see new developments across medical education and training to improve patient care in England.



HEE and BTBC team members, along with King's College Hospital staff, had a great time at the HSJ awards this month; it was fantastic for BTBC's joint project with King's to be nominated for the Patient Safety award (page 2). We received some very positive feedback from the judges who said that the project shows great initiative, ensuring patients receive expert care at their time of admission.

I am pleased to announce that our Broadening the Foundation Programme report is almost ready for general release due to the hard work of the team and the quick sign off from the HEE Directors of Education and Quality, who have shown great support throughout (page 2).

Last month, we participated in the Association for Simulated Practice in Healthcare (ASPiH)'s annual conference (page 3). More than 400 people attended the conference, which focussed on valuing safe professional practice - HEE held two key workshops for delegates and the outputs from both were really valuable to inform our work. As well as working with ASPiH on scoping out simulation and technology enhanced learning (TEL) activity, I was also pleased to attend a key meeting with ASPiH and our partners at the medical Royal Colleges where we agreed to work together to develop a set of standards for simulation based healthcare educators during 2014/15. We'll keep you updated as work in this area moves forward.

It's been such a successful year for BTBC – thank you to everyone involved. I wish you a very festive season, a safe new year and we look forward to bringing you more on our progress in 2014.

## Inside this issue

*Pilot recognised at  
HSJ awards*

PAGE 2

*BTBC Pilot goes  
global*

PAGE 3

*South Manchester  
pilot success*

PAGE 4

*An interview with  
Edward Maile*

PAGE 5

# Pilot recognised at HSJ Awards

*The Health Service Journal (HSJ) awards are one of the largest celebrations of healthcare excellence in the UK, highlighting innovative and successful people and projects in the sector.*

BTBC, in partnership with King's College Hospital NHS Foundation Trust, were proud to have been nominated and shortlisted for the HSJ's Patient Safety Award, although were not the winners on the night. A number of our pilots are showing that their work has delivered not only benefits to the trainees and trainers but as importantly, incremental improvements to patient safety.

This year the HSJ received a record number of entries; with 139 organisations and 185 projects recognised on the shortlist as providers of healthcare excellence. The HEE BTBC team were joined by Chief Executive, Ian Cumming and Director of Nursing, Lisa Bayliss-Pratt. They attended the evening along with staff from King's College Hospital NHS Foundation Trust, who were nominated due to the success experienced by their Rapid Access Treatment Plus (RAT+) pilot project. This award focused on emphasising the importance of patient safety and thereafter seeking to introduce a new culture which includes improving the consistency of how incidents are reported, investigated, acted on and then what can be learned from them. The King's project has shown a consistent two-thirds reduction in waiting time for initial assessment in A&E which is a considerable and noteworthy achievement for patients.

Patrick Mitchell, HEE Director of National Programmes, said: "It was fantastic for BTBC's joint project with King's to be nominated for the award; I was so pleased for the King's team who have worked so hard all year on their pilot and for my team to be recognised for their contribution to the delivery – it was a true honour to be shortlisted. Although King's did not win the award we were all winners – and especially the residents of Lambeth and Southwark served by the Trust. My sincere congratulations to Great Ormond Street Hospital for Children NHS Foundation Trust who took the award."

[Read more about the RAT+ Project.](#)

# Broadening the Foundation Programme report update

*We are pleased to announce that the Broadening the Foundation Programme report, which responds to the recommendations highlighted in Professor John Collins' Foundation for Excellence report will be formally launched nationally in January.*

The recommendations and guidance address the evolving needs of the patient, emphasising that services are reconfigured to create more community experience to ensure that foundation doctors are better equipped to care for the whole patient.

Stay tuned...



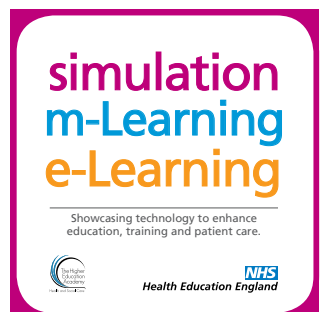
# Key BTBC workshops at ASPiH conference

*In November, we participated in the Association for Simulated Practice in Healthcare (ASPiH)'s annual conference. More than 400 people attended the conference, which focussed on valuing safe professional practice.*

Whilst at the conference we held two key workshops. The first was a joint workshop with the Joint Royal Colleges of Physicians' Training Board (JRCPTB), exploring the impact of simulation in core medical training, and the second looked at the opportunities for adoption of some of our technology-related BTBC pilots. Both were very useful sessions to inform our overall work around technology enhanced learning (TEL) with a view to sharing good practice and helping to spread TEL innovations and activities UK-wide.

As you may know, HEE are working closely with ASPiH on our TEL scoping and review activities and are using the outputs from their simulation development project (jointly run with the Higher Education Academy) to inform our work. As part of this project, they have distributed questionnaires nationally to scope simulation-based healthcare education, and are extending this to cover e-Learning and m-Learning. If you haven't already, please complete their [questionnaire](#).

For more information on our TEL programme, read our introductory [brochure](#).



# BTBC pilot goes global!

*Fantastic news this month for Western Sussex Hospitals NHS Foundation Trust, who have been selected to give an oral presentation outlining their pilot project and its successes at the Canadian Conference on Medical Education (CCME).*

The CCME will be taking place in Ottawa, Canada, next year and will include presentations from many different medical professionals from all over Europe.

In partnership with Airedale NHS Foundation Trust, Western Sussex has done some amazing work around telemedicine. Their presentation will outline how using secure video-links in simulated learning environments, in a planned way, offers new efficiencies and the opportunity for an improved educational interaction for both the learner and assessor. When fully functional, the equipment provides instant learning opportunities as patient data can be accessible online, as well as the learner's e-portfolio. This means feedback can be given immediately in a timely and interactive way.

Look out for a follow-up article next year after the event, where we'll have an exclusive chat with the Western Sussex team about their project and the event.







# South Manchester pilot success

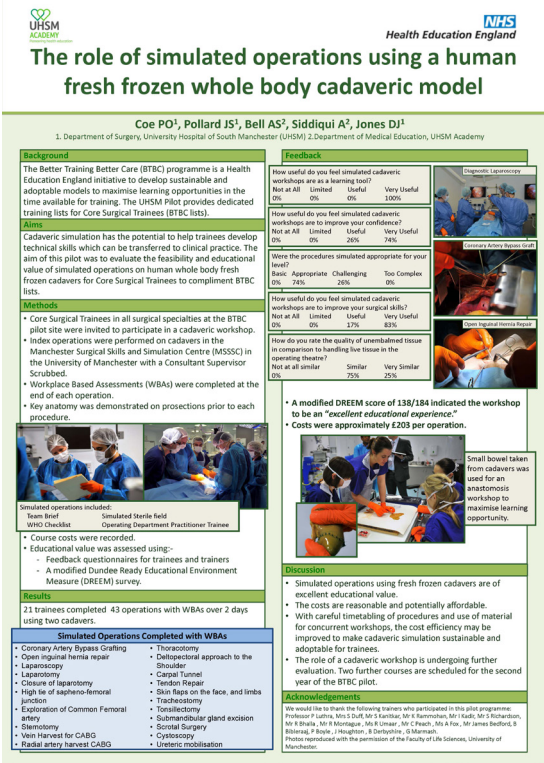
Photo caption: Mr Ian Ritchie President of the Royal College of Surgeons of Edinburgh presenting the award to Peter Coe.

Our BTBC pilot project with the University Hospital of South Manchester NHS Foundation Trust has been doing wonderful work to increase the learning and training opportunities for core surgical trainees, by creating dedicated 'BTBC lists'.

This project allows core surgical trainees access to protected training theatre lists to improve both operative and non-operative skills. In addition to training lists, the pilot has seen trainees carry out simulated operations in cadaveric workshops.

One of the core surgical trainees from the University Hospital of South Manchester (UHSM) pilot, Mr Peter Coe, recently won first prize at the Faculty of Surgical Trainers of the Royal College of Surgeons of Edinburgh meeting, for his poster describing the educational outcomes of the cadaveric workshops. Congratulations!

Peter said: "The BTBC pilot had a really positive impact on my training and gave me access to high-quality training opportunities unique to UHSM. The combination of simulated operations in the cadaveric workshop with dedicated training lists was particularly good to help prepare me, and my peers, to perform specific indexed procedures. I'm delighted to have won first prize at this prestigious event and I think it is a testament to the hard work of everyone involved in the pilot that it has been recognised on a national level."



# An interview with Edward Maile

This month we caught up with Edward Maile, Academic FY2 doctor from Oxford University Hospitals NHS Trust to talk about his winning Inspire Improvement project, 'Move, Eat, Treat'. Oliver's project looks at delivering effective lifestyle advice and aims to create a proactive healthcare system which empowers patients to self-care.



## Why this idea, this project?

Poor lifestyles are a huge contributor to rising rates of obesity and chronic disease in the UK. This is having a significant negative impact on patients with these conditions as well as placing the NHS and wider UK economy under significant financial strain. To put this in context, there are currently 800,000 morbidly obese people in the UK and obesity costs the UK economy £15.8 billion per year. Lifestyle interventions delivered by healthcare professionals are effective at helping patients to adopt healthier behaviours. Despite this, I have not received any significant teaching on how to deliver effective lifestyle advice either at medical school or during my postgraduate education. This seemed illogical and our teaching project aims to address this by equipping every foundation doctor in the Thames Valley with the ability to deliver effective lifestyle advice to their patients.

## What aspects will make up the 'core skills toolbox' that trainees will use?

The skills toolbox comprises a set of evidence-based communication techniques that junior doctors can employ whilst speaking to their patients about their lifestyle. These include a brief intervention following the 'ask, advise, act' paradigm and techniques drawn from health coaching such as goal setting, action planning and diary-keeping.

## Why and how do you think this project will better prepare clinicians to give advice on healthy lifestyle?

The teaching project is deliberately designed to be directly applicable to the busy life on the wards or in clinic. The teaching interventions are brief, simple and evidence-based to encourage utilisation. The teaching programme includes practice with simulated patients to make the teaching as realistic and applicable as possible.

## Is the training easily adapted to individual patients and is it adoptable at other trusts?

Yes. The techniques are adaptable to a diverse range of lifestyle issues such as diet, exercise, smoking, alcohol use and sleep. The prevalence of problems such as smoking, harmful alcohol consumption and sedentary behavior is such that there will be huge opportunity in every medical environment to deploy these techniques.

## How do you believe this project can change the shape of healthcare needs in the future if the project was adopted UK wide? Do you see there being significant reductions in medical and surgical procedures such as gastric band operations or a reduction in lifestyle related illnesses?

To build an NHS to face 21st century challenges we need to rethink our approach to healthcare by placing prevention at the heart of everything we do. This encompasses both population level-health policy interventions such as taxation or plain packaging of cigarettes and individual-level interventions such as the ones that this project aims to deliver. This project is one tiny part of this strategy but if we combine to make this our focus then we can build a healthy, happy and active Britain for the future.

## Is the project economically viable?

Hugely. If we can save a tiny fraction of the cost to the NHS and wider economy of obesity and lifestyle-related disease then the project will represent excellent value.

# Five minutes with...

## Ed Donald, Chief Executive, Royal Berkshire NHS Foundation Trust

*This month we have caught up with Edward Donald to get his thoughts on the 'Making Every Moment Count' pilot at Royal Berkshire NHS Foundation Trust. The pilot aims to help address the apparent gap between learning opportunities from everyday recognised problems and how these translate into effective action and improvement change. Trainees are tasked to identify issues or problems and oversee quality improvement projects to address them, each supported by a consultant supervisor. Edward explains why he wanted his Trust to be involved and how the pilot has affected the ways of working at the Trust.*



**Why did this strike you as a project that you were keen to see implemented in your Trust?**

The idea of supporting the next generation of consultants to learn about quality improvement and to lead and deliver a change project on a MDT basis was too good to miss. Knowing that Dr Emma Vaux would lead the programme gave confidence that it was highly likely to be successful.

**What do you feel is the most beneficial outcome from this project?**

Impact on morale, learning and development of junior doctors and whole team they led - learning great ways of working and quality improvement habits for life.

**Do you feel that staff have embraced the project? Are they keen to see it adopted further?**

Staff are so keen to establish this way of working, a leadership academy for junior doctors has recently been established.

Through the BTBC programme, we have seen how structuring education and training has a positive impact on both the trainee and trainer, and most importantly patient care. What is Royal Berkshire doing to ensure that education and training is high on their priority list? (i.e. is it on the agenda at trust board level? Is training and education recognised as a priority for the Trust etc).

Education and learning is critical to being a good place to work train and learn. This is a key agenda item across the Royal Berkshire.

**This project has put Royal Berkshire in the spotlight, where do you see this project going in the future?**

Going from strength to strength and becoming our in-house consultancy for quality improvement that really makes a difference for everyone involved.