

Better Training Better Care Pilot projects }

16 Better Training Better Care (BTBC) pilots have been run across England. Inside is a snapshot of each project and how they have improved their service delivery, training and education, and most importantly, patient care.

The pilots are part of a wider BTBC programme, which was developed to implement the recommendations from Professor Sir John Temple's report, *Time for Training*, and Professor John Collins' review, *Foundation for Excellence*.

The BTBC programme includes work around the role of the trainee and trainer, career planning, workforce redesign, the use of technology enhanced learning, broadening the Foundation Programme, improvements to regulation and the development of financial incentives for improved quality of education and training delivery.

The evaluation results are showing that putting structure and systems in place for medical education provides improvements to the delivery of training and patient care. The pilots have been an example of this and we plan to share the learnings from these across the UK, supported by our Local Education and Training Boards.

To find out more, visit www.hee.nhs.uk/work-programmes/btbc, follow us at @NHS_HealthEdEng or check out our facebook page at www.facebook.com/nhshee.

**16 pilot projects working to improve education
and training and, in turn, patient care.**

Making a difference – a review of our pilot sites

Our 16 pilot projects have delivered some great results. We've published a snapshot of each project below.

Airedale NHS Foundation Trust and Western Sussex Hospitals NHS Foundation Trust

Using telemedicine to enhance training and improve supervision and support.

The Airedale and Western Sussex telemedicine pilot provided an innovative way of using telemedicine to enable remote supervision and handover across disparate locations. This helped maximise resources as well as delivering a service with increased senior input into medical education and patient care. The pilot highlighted the importance of putting more standardised procedures in place to further improve the handover process across the Trusts.

This project relates to the areas of handover, technology enhanced learning (TEL), quality improvement and multi-disciplinary working within a trust.

Data for Airedale shows:

- Trainees felt more supported and more engaged in the hospital night team
- trainers felt that the system would allow better use of time by sharing resources
- 73% of consultants and trainees felt remote consultant input would improve the quality of care to patients.

East Kent Hospital University NHS Foundation Trust

Establishing hot 'emergency-based' and cold 'ward-based' teams to enhance the trainee experience, improving patient care at weekends.

East Kent has had great success in demonstrating a reduction in the overall length of stay across long term conditions and urgent care representing savings of up to £663k annually and an increase in Saturday and Sunday discharges by 20% and 6% respectively. There has been a significant impact on trainees who recorded experiencing better supervision and support in both the hot and cold blocks of working. In addition, the introduction of the enhanced multidisciplinary cold team has enabled nurses to provide much needed and valued support to trainees and to make a significant difference to the patient experience. The success of this pilot has seen the roll out of this model across all three hospital sites.

This project relates to the areas of handover, out of hours care and patient rotas within a trust.

East London NHS Foundation Trust

Reducing the severity, frequency and impact of serious incidents (SIs) through simulation training.



East London's pilot provided an opportunity through simulation training to promote the importance of learning from serious incidents, for trainees and nurses – they had 89% attendance rate at these sessions. Outcome measures indicate an overall increase in knowledge and awareness of serious incidents. 98% of delegates said that the course will change their practice for the better and that they will be applying the knowledge and skills learned during the session in their future work. This training is now continuing as business as usual within the organisation.

This project relates to the area of TEL within a trust.

Heart of England NHS Foundation Trust

Enhancing the transition from student to doctor through the e-learning virtual interactive teaching and learning (VITAL) project.

Heart of England undertook an early identification through the web-based learning programme and found that the bottom 10% of their foundation year one (FY1) doctors required professional support. These trainees scores improved following their educational support meetings. The pilot also highlighted the ability to reach trainees with different learning styles due to the multi-format educational materials and after using these materials a 4.5% improvement was found in their VITAL assessment scores. Overall, three assessments were delivered for 90 FY1 doctors and two assessments were delivered for 90 foundation year two (FY2) doctors.

This project relates to the areas of TEL and multi-disciplinary working within a trust.

Guy's and St Thomas' NHS Foundation Trust

Balancing excellent service provision to deliver first class training through a planned modular training project.

This pilot project tested the feasibility of creating a modular training rota, which in this case was in the gynae-oncology module. Trainees involved reported a greater appreciation for the experience of their patients, with outcomes demonstrating more than 50% increase in trainee confidence and 100% clinical competency in their logbook requirements. After eight weeks of the pilot, the ST3 trainees involved achieved similar improvements in knowledge as a control group of ST5 trainees who had spent six months in the unit. Another key success of this project is that the trainers involved reported an increased interest to teach and see the progress of their trainees.



This project relates to the area of patient rotas and scheduling within a trust.

King's College Hospital NHS Foundation Trust

Reducing the length of time patients spent in the Emergency Department, using the Rapid Assessment & Treatment (RAT+) model.

King's College and their RAT+ project demonstrated statistically significant improvements in:

Data for King's shows:

- *66.6% of medical and 60% of nursing staff reported that RAT+ improves the quality of care*
- *medical and nursing staff reported an improvement in the patient experience with RAT+*
- *78.3% of clinical staff agreed that RAT+ improved patient safety.*

- ‘time to treatment’: consistently achieving the 60 minute quality indication (QI) for majors patients
- ‘time to referral’: considerably reducing the median ‘time to referral’ to in-patient teams from arrival (approx 105 minutes vs. 180 minutes)
- ‘total time’: a reduction in the mean ‘total time’ in the emergency department, when compared to the non-RAT+ control group, by 23.7 minutes (equivalent to 10%) The majority of medical and nursing staff also reported that RAT+ improves the quality of care.

This project relates to the areas of accident and emergency and multi-disciplinary working within a trust.

Leeds and York Partnership NHS Foundation Trust

Maximising and enhancing training opportunities and clinical time with patients by changing working patterns.

Data for Leeds and York shows:

- Patients benefitted as trainees were able to spend more time with each patient
- 54% of staff agreed that the changes implemented had a positive impact on patient care and satisfaction.

100% of the trainees at Leeds and York have reported more confidence in their work since the pilot and 83% agree or strongly agree that they have benefitted from the change in rota. The pilot saw an increase in productivity with weekday activity increasing by 37.7%, weekend activity rising by 29.1% and night shift activity by 22.1%.

This project relates to the areas of handover, TEL, quality improvement, scheduling and multi-disciplinary working within a trust.

Leeds Teaching Hospitals NHS Trust

Advanced training and education in acute general surgery through novel interventions.

Leeds provided four very well received teaching sessions on trauma skills using sub-specialty colleagues as trainers and using wet-lab cadavers. These sessions were all filmed, and are currently being edited into a format which will act as a teaching resource for training surgeons in key trauma skills. 40% of trainees reported feeling higher levels of skill and confidence after these training sessions.

This project relates to the area of TEL within a Trust.

The Mid Cheshire Hospitals NHS Foundation Trust

Enhancing training and education in handover and a supporting electronic solution.

Mid Cheshire's results demonstrated an 82.6% improvement in 'out of hours' tasks being handed over and completed after the interventions. In addition, they found a statistically significant 10% increase in 'out of hours' discharge rates, without any negative effects on length of stay. Results from their video observations revealed that 60% of handovers adhered to the 'Think FIRST' technique with 45% using elements of the situation, background, assessment and recommendation (SBAR) technique. Clear leadership in the handover process was present in 100% of meetings.



This project relates to the areas of handover and TEL within a trust.

North Bristol NHS Trust

Improving training in consultation skills and investigating the use of video-recorded consultations as a training tool in the outpatients department.

North Bristol have successfully embedded a process for training in outpatient consultation skills in the medical department. They have done this by developing a robust method for recording and playback of outpatient consultations which is acceptable to clinicians and patients, reliable and compatible with the storage and transfer of sensitive material. This pilot enabled participating trainees to develop and improve their consultation skills with 85% of feedback sessions actively helping the trainee to identify something they would do differently in future consultations. There was also a 28% increase in the number of trainees who believe that feedback on their video recordings is an effective way to improve their consultation skills. In addition, 100% of feedback sessions have helped consultant trainers to suggest changes to their registrars consultation style or strategy.

This project relates to the area of TEL within a trust.

Pennine Acute Hospitals NHS Trust (EPIC)

Rewarding trainees who take part in a right mix of educational and clinical activities using the Emergency Physician In-House Challenge (EPIC).

Data for Pennine shows:

- 25% increase in number of workplace based assessments (WPBAs) taken per FY2 trainee
- improved trainee satisfaction
- improved amount and quality of consultant supervision
- more opportunities to complete WPBAs
- better overall experience in the A&E department.

Pennine have seen an increase in clinical productivity during their pilot, which was aimed at foundation year two (FY2) doctors, GP vocational training scheme (GPVTS) and specialty training year one (ST1) grades. For FY2s, there was an average increase of two patients seen per trainee per shift. With an average of 12 shifts per day, this equates to an additional 24 patients seen per day, which is equivalent to two extra doctors' workload, for which three to four full time FY2s would need to be employed at a gross cost of roughly £120,000 per year.

This project relates to the areas of TEL and accident and emergency within a trust.

Pennine Acute Hospitals NHS Trust (Handheld)

Optimise training and education using handheld devices for handover in the infectious diseases department.

Pennine have developed a usable electronic handover system which captures both relevant handover information and education opportunities. This is open-source software which can be distributed freely. Trainees have expressed enthusiasm for the potential of the pilot, the device and also the concept of being able to inform their training in this way.

This project relates to the areas of handover and TEL within a trust.

Royal Berkshire NHS Foundation Trust

Addressing the apparent gap between learning opportunities from every day recognised problems by 'making every moment count'.

Royal Berkshire sought to 'make every moment count' by embedding quality improvement (QI) as normal practice, utilising every learning opportunity to enhance quality of care for patients. There was huge enthusiasm from trainees with 27 projects being delivered, involving 45 trainees across different grades and specialities. This pilot has seen the creation of resources such as; a training DVD, patient information DVD and the development of e-learning packages on QI. This project is now continuing successfully within the organisation under the new Quality, Innovation, Productivity and Prevention (QIPP) programme.



This project relates to the areas of quality improvement and multi-disciplinary working within a trust.

Tees, Esk and Wear Valley NHS Foundation Trust

Improving basic psychiatric training through revised early supervision and support arrangements.

The most significant achievement for Tees, Esk and Wear Valley was the increase in the amount of direct supervision that new psychiatry doctors received in their first four weeks in post. The piloting of changes in IT and electronic records training resulted in new arrangements for this to be rolled out across the Trust. At the end of the pilot, electronic records training also improved as the time trainees spent on this element was halved – yet competency levels improved.

This project relates to the areas of quality improvement, patient rotas and multi-disciplinary working within a trust.

University Hospital of South Manchester NHS Foundation Trust

Increasing learning and training opportunities for core surgical trainees by creating dedicated ‘better training better care lists’.



South Manchester found a significant improvement of 12.7% in the amount of supervised operative training for core surgical trainees. The use of cadavers enabled them to gain confidence by getting experience in certain areas much earlier than they would have without the pilot. 76% of trainees felt the theatre sessions were enough to gain the appropriate experience and 84% felt that the theatre lists had the right mix to suit their training needs. Other evidence from the surgical theatre educational environment measure (STEEM) test suggests that trainees considered the training a highly positive experience.

This project relates to the areas of TEL, patient rotas and multi-disciplinary working within a trust.

The Dudley Group NHS Foundation Trust

Bringing together pre-registration pharmacists and foundation trainees for improved training, education and prescribing.

The pilot project at Dudley Group demonstrated an improved relationship between the pharmacy department, trainees and consultants who were a part of the programme. The percentage of trainees adhering to the national prescription guidelines has increased, with a further increase found in FY1 and FY2 doctors frequently considering the impact of the medication before prescribing any to the patient. Throughout the programme consultants who had been involved became more aware of the risks around prescribing and would contact the facilitator to ask if more areas could be brought into the teaching, or if particular areas of concern could be built into the sessions for the following year.

Data from Dudley Group shows:

- Increased confidence in trainees
- less anxiety when prescribing medicine on their own
- a decrease in the trend amongst FY1 trainees who frequently asked for advice before prescribing.

This project relates to the area of multi-disciplinary working within a trust.