



RLHOTS Training Hospital of the Year 2015

John Stammers ST6

(RL Rotation BOTA Linkman)











Outline



- Background
- What did we learn from 2014
- Method
- Data
- Results
 - Survey
 - Elogbook
 - Indicative procedures
 - Rota's, banding and EWTD
- The future
- And the winner is....







2014 pilot to identify what trainees want from their hospital

Compare the 12 hospitals around the rotation on subjective and objective training aspects

Calculate the winning hospital



What did we learn from 2014





Feedback

"it would be good to see indicative numbers"

"influence of rotas, banding and EWTD

compliance on numbers"

"my consultant is considerate to theatre

casemix volume and type for my training needs
and that should be acknowledged"

"three clinics with my consultant is about right"

"Results can be biased by one trainee"



RE: Letter of commendation Orthopaedic Department

BURGESS Stephen (RF4) BHR Hospitals <Stephen.Burgess@bhrhospitals.nhs.uk>

Fo: Stammers John (BARTS HEALTH NHS TRUST); HOPKINS Matthew (RF4) BHR Hospitals

John. Receiving your E-mail was most certainly a fantastic start to my day! Can I thank you for lettin my thanks to the department. I* agree that the trauma meetings are excellent. The department has co



Method



Three objective

- 1. Overall numbers
- 2. Percentage STS/STU/Performed to assisted
- 3. Number of indicative procedures achieved.

Seven subjective questions

- 4. Average Number Clinics/week?
- 5. Average Number Operating sessions/week
- 6. How do you rate the educational value of the trauma meeting
- 7. Are you given fair opportunity to get to teaching?
- 8. Are clinics used to provide any educational value?
- 9. Are your training needs considered in planning theatre casemix volume or type?
- 10. Would you recommend this job?
- Data obtained at two six month intervals
- Each criteria 10 points
- 100 points available



Data



- 21 (April-Oct 2014)
 - x1 OOP
- 26 (Oct 2014-April 2015)
 - x1 Maternity
 - x1 OOP
 - x1 Out of region

44 elogbook reports

LATS excluded



23 (inc 2 LATS) Trainee surveys April 2014-Oct 2014 (96% eligible trainee completion)



24 (inc 1 LAT) Trainee surveys Oct 2014-April 2015 (100% eligible trainee completion)

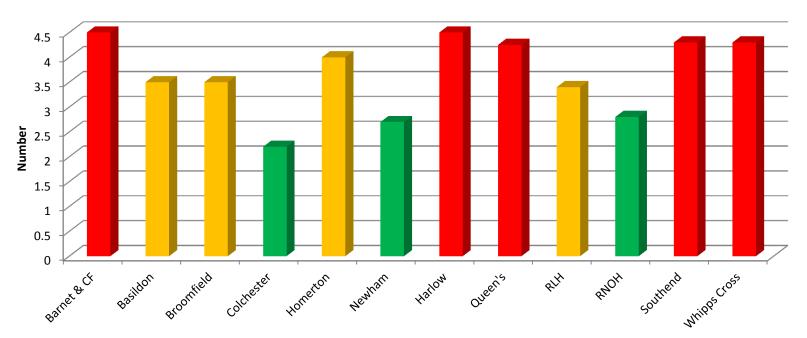


Average Number Clinics/week?



Do you internally cover other registrar's or consultant's clinics when people are away?

Average Number of Clinics per Week



Hospital

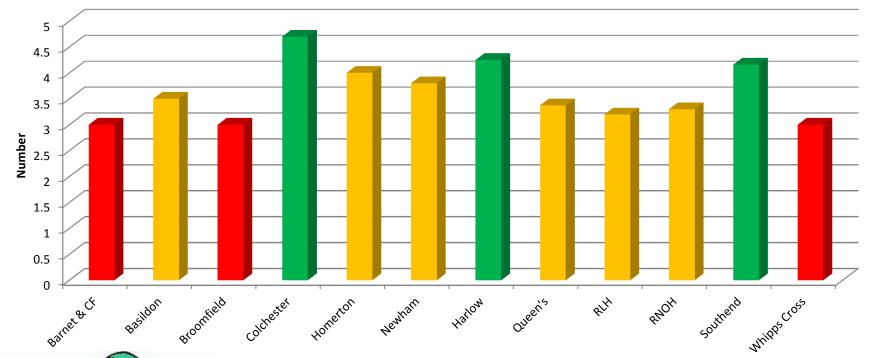


Clinic sessions	Points
<3	10
3-3.5	7.5
3.5-4	5
4-4.5	2.5
>4.5	0











Hospital

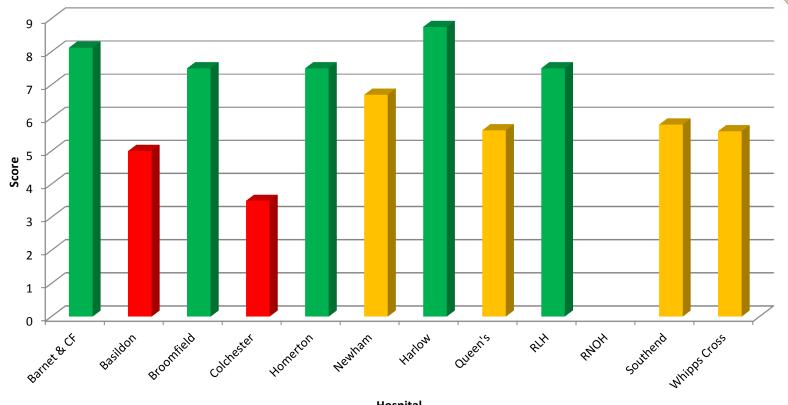
Theatre sessions	Points
<2.5	0
2.5-3.0	2.5
3-4	5
4.0-4.5	7.5
>4.5	10

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Educational Value of the Trauma Meeting



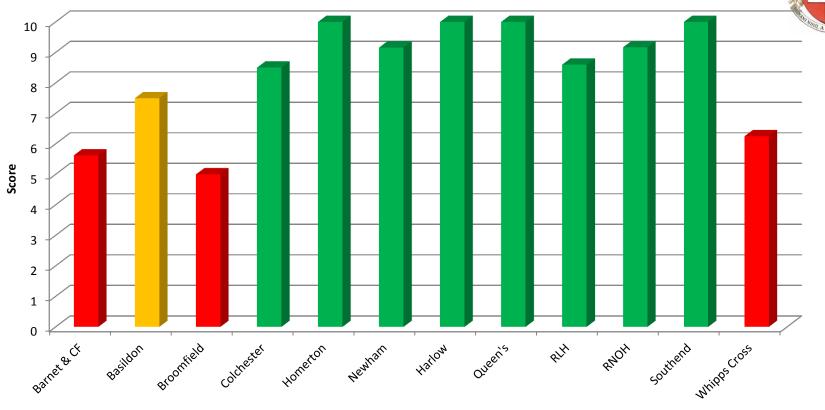


Hospital

Excellent	10
Good	7.5
Average	5
Poor	2.5
Pointless	0



Fair opportunity to get to teaching (RLH/RNOH/Addenbrookes)



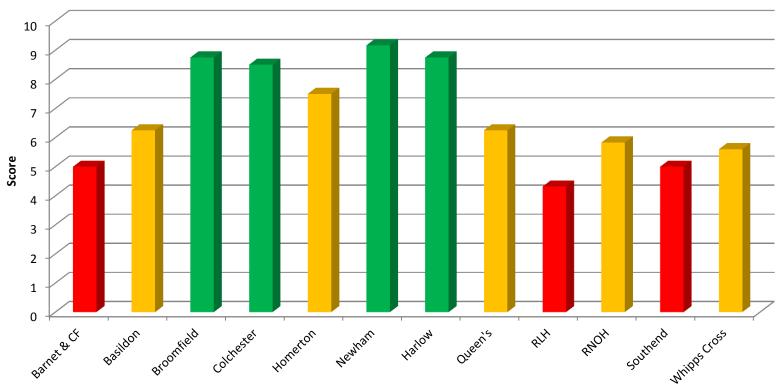
Hospital

Always	10
Most time	7.5
50:50	5
Rarely	2.5
Never	0



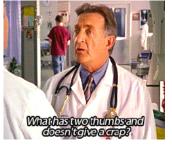


Are Clinics used to Provide Educational Value?



Hospital







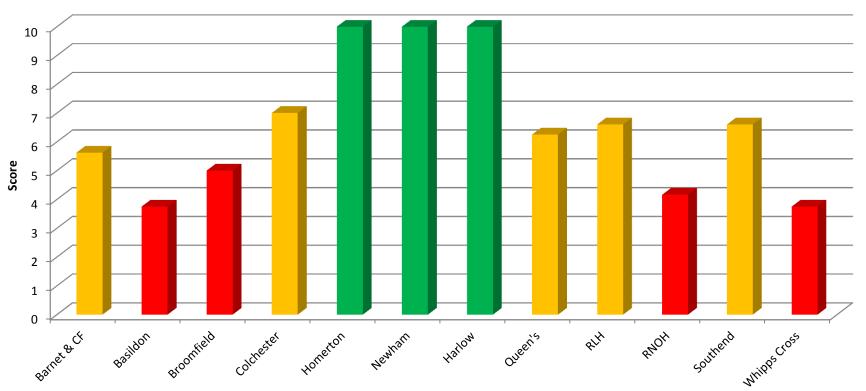
Strongly agree	10
Agree	7.5
Indifferent	5
Disagree	2.5
Strongly disagree	0



Are your training needs considered in planning theatre casemix volume or type?



(is there enough time allowed for the trainee to perform case or part thereof, is there an appropriate mix of cases appropriate to trainees level and ability, is there provisio



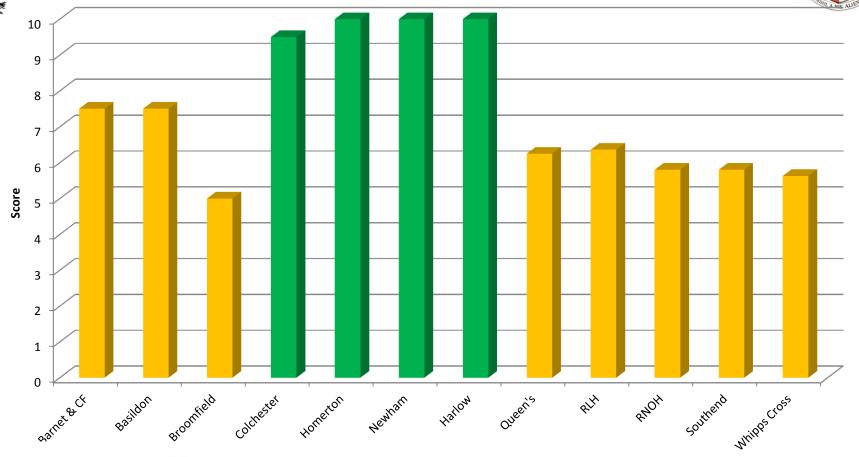
Hospital

Strongly agree	10
Agree	7.5
Indifferent	5
Disagree	2.5
Strongly disagree	0



Would you recommend this job/Hospital to your colleagues/Would you pick this job/Hospital again if you could turn back time







Hospital

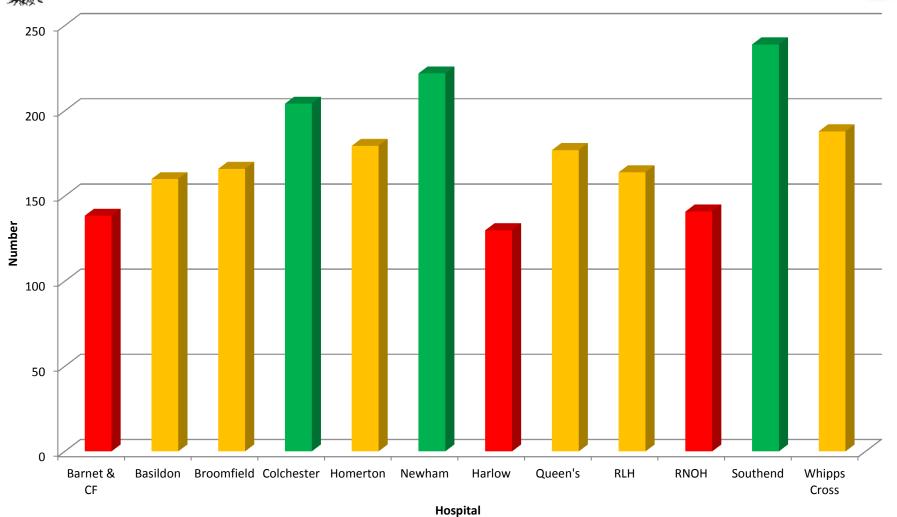
Strongly agree	10
Agree	7.5
Indifferent	5
Disagree	2.5
Strongly disagree	0

RLHOTS 2015





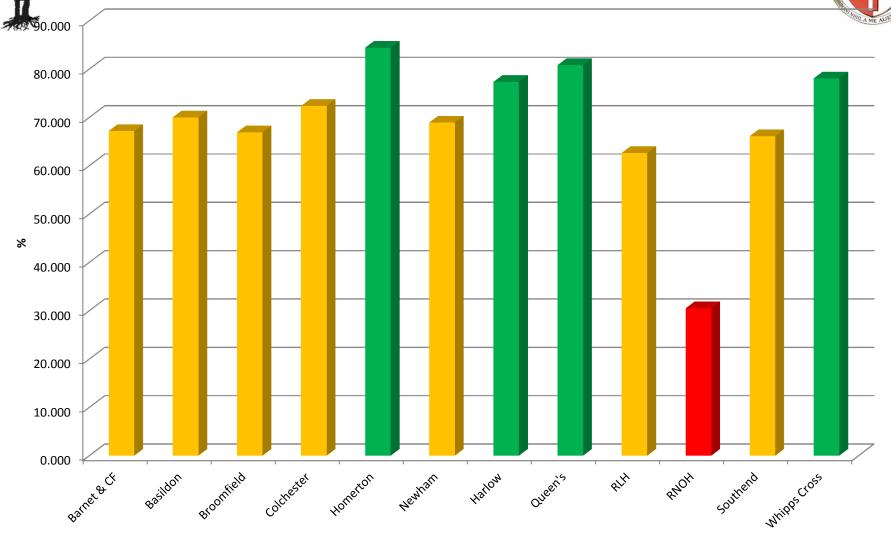






Percentage STS/STU/Perf to Assisting

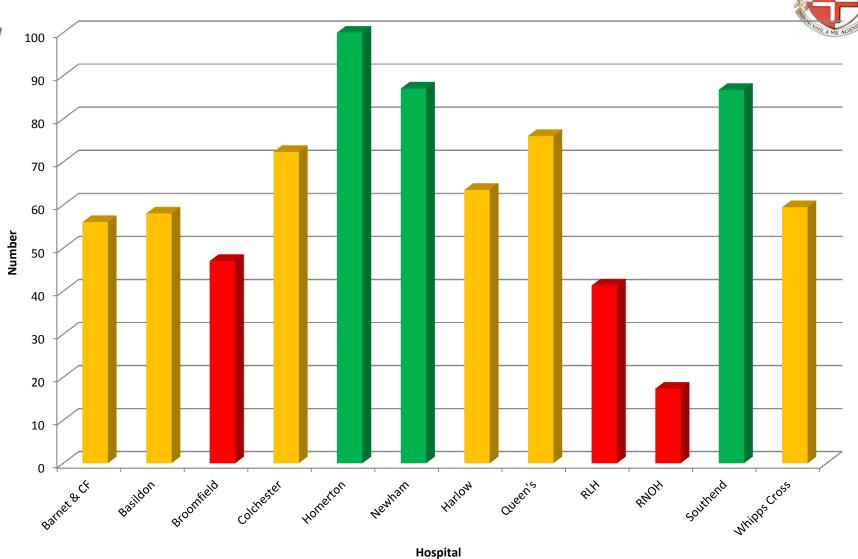




Hospital



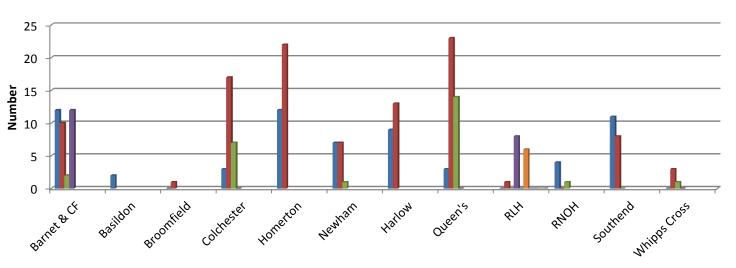
Indicative Numbers STS/STU/Performed Only



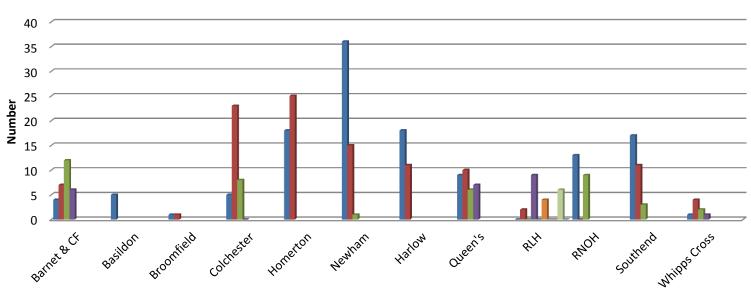




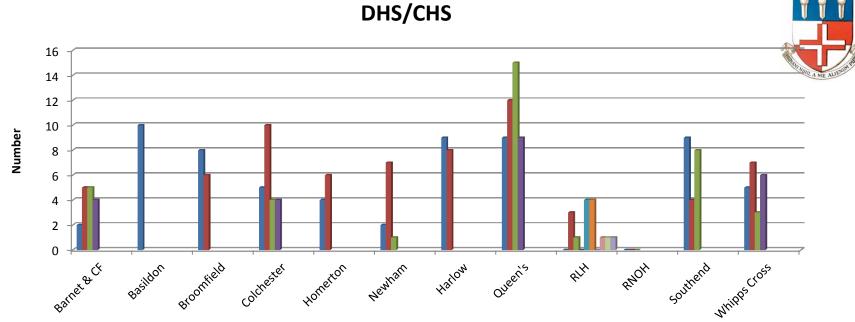




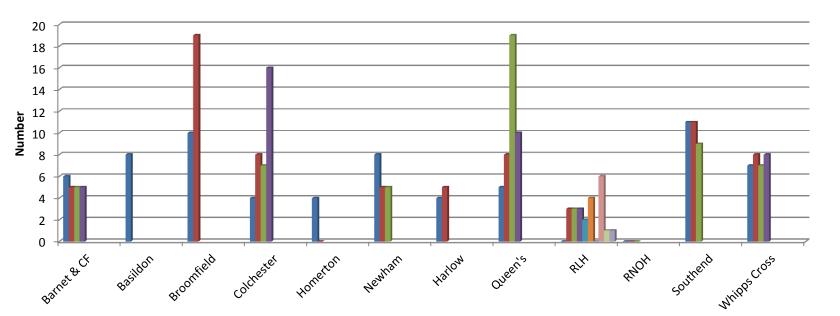








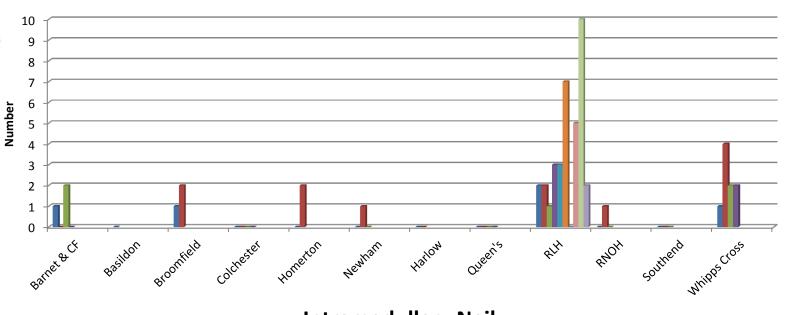
Hip Hemiarthroplasty



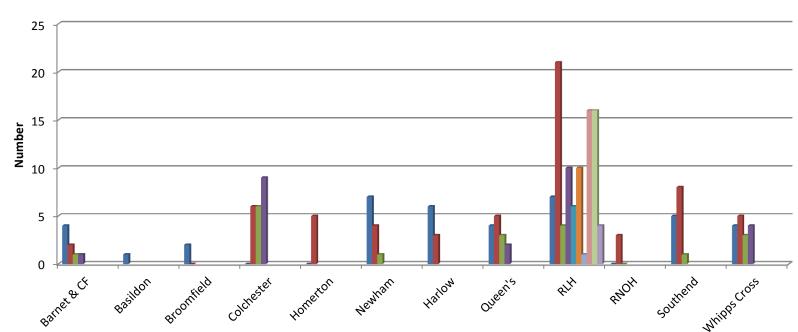


External Fixator





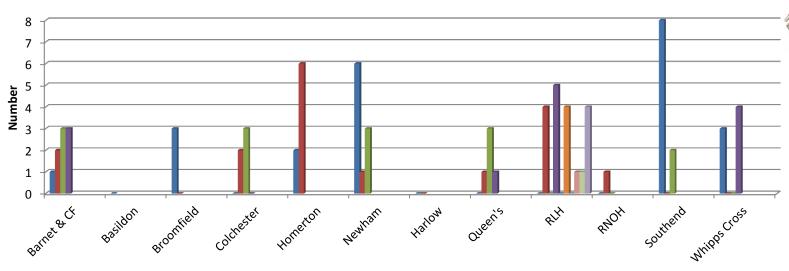
Intramedullary Nail



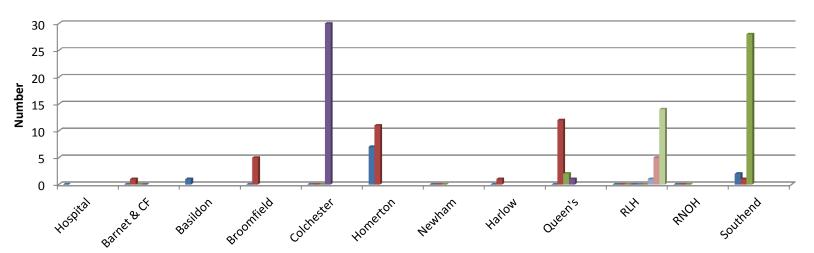








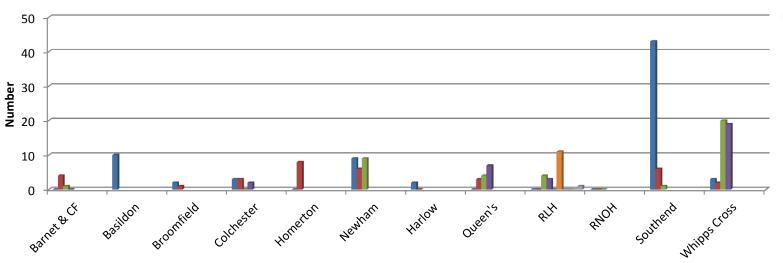
1st Ray Surgery



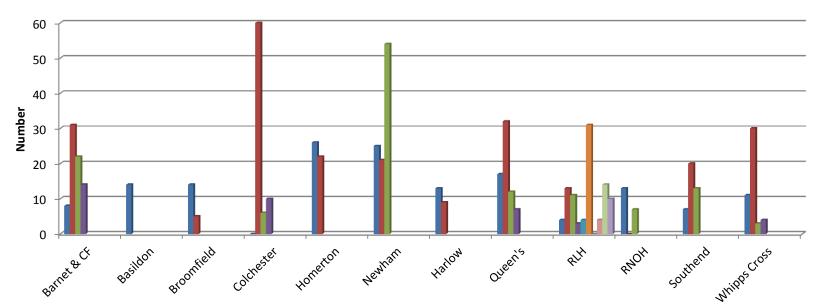


CTD





Arthroscopy





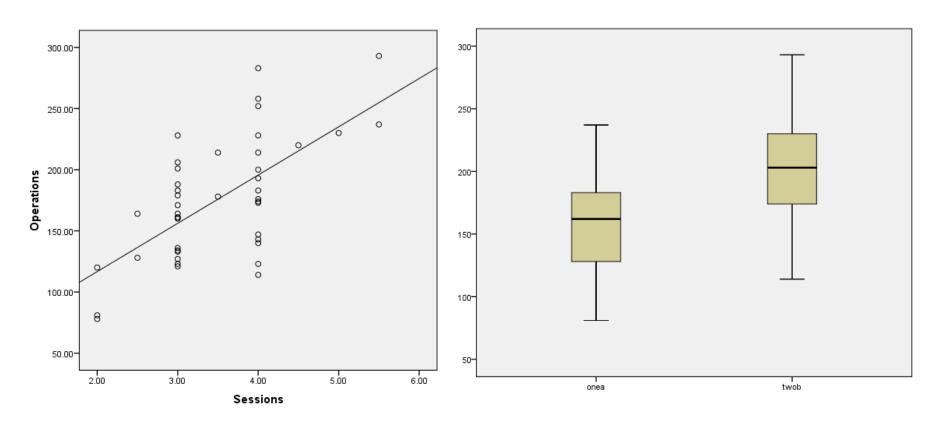
EWTD, rota's, banding and total numbers

Hospital	Banding	EWTD restriction	Theatre sessions	Total Numbers
Barnet & CF	1 a	Rarely/Neutral	3	138.5
Basildon	1a	Neutral	3.5	160
Broomfield	1b	Often	3	166
Colchester	2b	Never	4.7	204.25
Homerton	1 a	Always	4	179.5
Newham	1 a	Neutral/Rarely	3.8	222
Harlow	2b	Rarely/Never	4.25	130
Queen's	1 a	Always/Neutral	3.375	177
RLH	1a/2b	Never/Neutral/Often	3.2	164
RNOH	1 a	Never/rarely	3.3	141
Southend	2b	Rarely/often/always	4.16	239
Whipps Cross	2b/1a/1b	Often/neutral	3	188



EWTD, rota's, banding and total numbers

Pearson correlation 0.646 Sig < 0.01





Trainee Supported Initiatives to balance service provision with EWTD



- Increased 2b non-EWTD rota's.
- Maximum of 3 clinics. Extra clinics paid as locum separate to EWTD and does not replace theatre sessions.
- Extra paid theatre lists. (predominantly weekend)
- Use of non training registrars to cover heavy clinic commitments.





The Future



- Continued feedback from trainees and trainers to ensure data identifies what trainees want.
- Investigate impact of service provision based rotas on trainee numbers. (1st on call to A&E, nights, ward cover roles)
- If trainees matched to trainers rather than hospital calculate appropriate trainee, level, trainer to indicative requirements.
- Collaboration with other rotations.





Thanks

Trainees for filling in yet another survey, and in advance of future surveys to come!

Mr Matthew Barry, TPD for spending his bank holiday weekend extracting logbook data.

