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Introduction

Despite its reputation as a centre of clinical excellence, National and Local feedback suggests a mismatch between this perception and the lived experience of resident doctors working at St Bartholomew's Hospital (SBH).

Rather than continuing the current approach of addressing individual concerns as they arise, we propose a bold, sustainable, data-driven strategy, to continuously enhance the resident doctor experience as measured by ongoing national survey feedback.

Our Vision:

To make St Bartholomew's the best hospital for resident doctors to train in!

Methods

The Improvement Committee

Following approval from the Hospital Executive Board, we established a new subcommittee embedded within the formal organisational structure, with both the authority and expertise to gather insights and implement meaningful improvements to the resident doctor experience.

The committee meets monthly and includes senior management (Deputy Medical Director and Director of Medical Education), Chief Registrars, Mess Representatives, representatives from Organisational Development, Human Resources and Quality Improvement, as well as resident doctor representatives.

Guiding Change

Although national surveys provide valuable insights, they often lack the depth required to inform targeted interventions - for example, highlighting low morale without identifying underlying causes. To address this, we have commissioned annual structured interviews, which will be analysed alongside survey data to guide meaningful change.

The issue

80% of our staff survey results have improved compared with last year. However this trend does not apply to the resident doctor cohort. Despite resident doctor morale being placed on the risk register in 2023 This continues to fall on the latest NHS staff survey (figure 1).

SBHCC - SBH CANCER CENTRE MEDICAL			
Year	2023	2024	Difference
Morale	6.27	5.54	-0.73
Thinking about leaving	6.67	6.44	-0.23
Work pressure	5.34	4.24	-1.10
Stressors	6.79	5.93	-0.86

Figure 1. NHS Staff Survey result showing decrease in workplace satisfaction compared with 2023

Using the GMC survey to understand training performance, we note a series of departments which are positive and negative outliers (figure 2). As a 'centre of excellence' we will pay a specific focus to ensure that no departments are negative outliers.

Site	Indicator	2023		2024		Site	Indicator	2023		2024	
		Score	Outcome	Score	Outcome			Score	Outcome	Score	Outcome
St Bartholomew's Hospital - R13HMD	Overall Satisfaction	83.33	Within IQR	87.50	Above	St Bartholomew's Hospital - R13HMD	Overall Satisfaction	81.25	Within IQR	65.71	Below
	Clinical Supervision	96.67	Within IQR	98.75	Within IQR		Clinical Supervision	90.83	Within IQR	80.10	Below
	Clinical Supervision out of hours	N less than 3		N less than 3			Clinical Supervision out of hours	85.76	Q1 but not below	76.04	Below
	Reporting Systems	78.33	Within IQR	92.50	Above		Reporting Systems	65.00	Within IQR	69.23	Within IQR
	Work Load	46.53	Within IQR	60.42	Within IQR		Work Load	48.26	Below	33.33	Below
	Teamwork	72.22	Within IQR	89.59	Above		Teamwork	55.90	Below	55.36	Below
	Handover	N less than 3		75.00	Within IQR		Supportive Environment	61.67	Below	58.93	Below
	Supportive Environment	71.67	Within IQR	88.75	Within IQR		Induction	75.63	Q1 but not below	67.41	Below
	Induction	92.92	Above	93.75	Above		Adequate Experience	81.25	Within IQR	71.43	Q1 but not below
	Adequate Experience	87.50	Within IQR	93.75	Within IQR		Curriculum Coverage				
	Curriculum Coverage						Educational Governance	66.67	Q1 but not below	83.33	Q4 but not above
	Educational Governance	66.67	Q1 but not below	83.33	Q4 but not above		Educational Supervision	67.36	Within IQR	59.52	Below
	Educational Supervision	85.42	Within IQR	90.63	Within IQR		Educational Supervision	84.90	Within IQR	77.23	Q1 but not below
	Feedback	79.17	Within IQR	84.38	Within IQR		Feedback	74.17	Q1 but not below	57.99	Below
Local Teaching	74.44	Within IQR	83.34	Above	Local Teaching	76.95	Within IQR	67.02	Below		
Regional Teaching	69.44	Within IQR	63.54	Q1 but not below	Regional Teaching	58.33	Within IQR	60.12	Within IQR		
Study Leave	N less than 3		90.63	Within IQR	Study Leave	75.57	Within IQR	72.32	Q1 but not below		
Rota Design	N less than 3		N less than 3		Facilities	55.28	Within IQR	60.47	Within IQR		
Facilities	68.75	Within IQR	65.83	Within IQR							

Figure 2. GMC Survey results showing a contrast between training in endocrinology as a positive outlier and radiology as a negative outlier

Results

What have we achieved so far?

- Creation of the improvement subcommittee
- Financial and resource support from the hospital executive board
- Structured interview proforma
- Rota re-organisation to reduce out-of-hours pressures

Discussion

Next steps: Performing structured interviews to guide specific change plans, using the committee to identify and implement feasible suggestions.

Sustainability: To ensure sustainability beyond our term, the subcommittee will be run by our deputy medical director and can function independent of the chief registrars

Timescale: This represents a cultural shift towards a long term vision, so while our goal is an improvement in the national survey results we are committed ongoing long term improvement.

Areas targeted for change: Mentorship, teaching and education, interview preparation, exam preparation and the doctors' mess

Conclusion

At St Bartholomew's, we have the opportunity to set a new standard for resident doctor training. By adopting a structured, data-driven and proactive approach, we can create lasting, meaningful improvements in education, well-being and career development. We hope that in time these steps will lead to our hospital being the best centre in the UK for resident doctors to train in.