

Chief registrar: developing an early-career model for clinical leadership development

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Introduction

Increasing demand, increasing public expectations and increasing complexity of healthcare have placed extraordinary demands on health services throughout the UK.^{1,2} In December 2016 the secretary of state for health announced the NHS required 'more clinical leadership, fewer glass ceilings, more career progression and more flexible working: these are the changes the NHS needs'.

Aims

To develop an early-career model for clinical leadership development.

Methods

The chief registrar (CR) scheme commenced recruitment in February 2016. Applicants should be ST5 and above and dual training in general internal medicine. The CR is unique among national schemes in that medical registrars continue to undertake clinical activities (50–60%) within their trust. This is complemented by protected time to partake in leadership activities which are relevant, practical and advantageous to the employing trust.

Patient safety, clinical outcomes and the quality of the patient experience are at the forefront of the CRs' work, enabling them to make real change on the 'shop floor'. Throughout the experience CRs develop professionally and clinically with a focus on the experiential and vertical development of leadership skills.

To support this, a bespoke leadership education programme is provided by the RCP in conjunction with Faculty of Medical Leadership and Management. Independent evaluation and economic analysis are in progress.

Results

21 CRs have been recruited to the pilot across England, Wales and Northern Ireland, with the intention of recruiting 50 chief registrars in the 2017/2018 cohort.

Case studies

- > CR (Warrington) freed up 78 bed days per month by developing, implementing and evaluating a weekend discharge ward round, with potential cost savings for the trust of £200,000 per year.
- > CR (Hampshire) led a series of initiatives to improve junior doctor morale within a trust where recruitment had been challenging. He increased junior doctor involvement in patient safety initiatives, organised a junior doctors' forum with senior consultants to discuss issues and solutions and ensured free accommodation for trainees on night shifts. These changes resulted in an 80% drop in junior doctor absenteeism over the six months compared with the same period a year earlier, and an impressive 90% would now recommend their job.

Interim results from an independent evaluation suggest the CR scheme is an excellent model for early career leadership development. ■

References

- 1 The King's Fund. *The NHS productivity challenge: Experience from the front line*. London: Kings Fund, 2014. Available at: www.kingsfund.org.uk/publications/nhs-productivity-challenge [accessed 7 Dec 2016]
- 2 The King's Fund. *Mental health under pressure*. London: Kings Fund, 2015. Available at: www.kingsfund.org.uk/publications/mental-health-under-pressure [accessed 7 Dec 2016]