

BUDDY SYSTEM

A way to improve the wellbeing of new resident doctors

“I wish we had this programme when I started!”

Authors

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Affiliations

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Introduction

St Andrews Healthcare in Northampton is a tertiary psychiatric hospital with multiple divisions. CAMHS, General Adult (Acute, PICU), Specialist wards (Eating disorder, locked rehabilitation), Learning Disability and Autism, Forensic Units (Low and Medium secure) and Neuropsychiatry (including Dementia, Brain Injury, Huntington's Disease and End of Life suites) wards.

Resident doctors identified through a survey that the current induction process does not support new doctors. Three main areas of concern were identified: information about their job roles, feeling confident for on-calls, and feeling welcomed. Some doctors commented that it took up to one year for them to feel comfortable in their duties.

Aims & Hypothesis

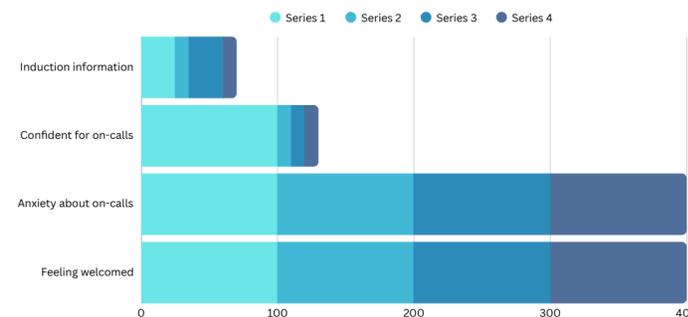
For 75% of new resident doctors to feel they have sufficient information to carry out their job roles, and feel confident in being on the on-call rota within three months of joining the charity, within all Divisions, by December 2025.

Methodology

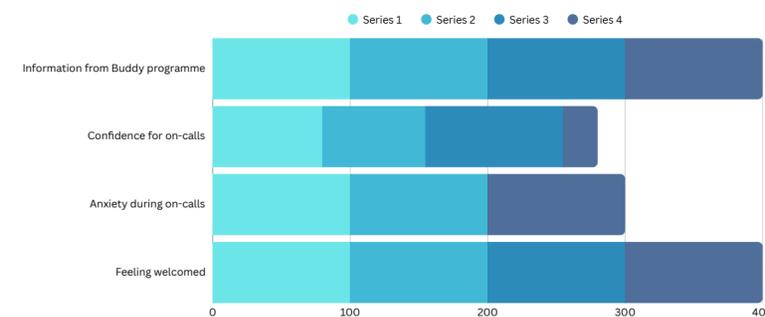
- 1 A Buddy programme was developed with formalised sessions to support a new non-consultant doctor in non-training roles. These included Speciality Doctors, Clinical Teaching Fellows and Associate Specialists and all eligible new doctors participated.
- 2 It began as a 6-month pilot in Medium Secure Unit before launching to the whole of Northampton site.
- 3 A booklet was created to support the Lead Buddies giving information to cover with their colleague. It was expected to be tailored to individual need, but it covered topics on how to support an IMG colleague in their first job in the UK to experienced colleagues.
- 4 Data analysis techniques included pre and post intervention online surveys with binary answers, and a Buddy feedback form. Additional feedback received through e-mails or cards.
- 5 PDSA cycle completed during this intervention with additional areas to improve. They will be part of the next PDSA cycle.

Pre-programme survey
%64 of all Non-consultant Drs responded to the questionnaire

Only 18% believe they receive appropriate information on their induction period
Only 33% believe they know about career progression pathways within St Andrews
25% feel confident about their job role and the information they receive after their induction period
Only 25% feel confident about starting on-calls, with nearly 40% expressing anxiety about on-calls
Nearly 60% said they felt welcomed by their peers, with overall 76% felt they wished they met their colleagues sooner



Pre-intervention survey



Post-intervention survey

I wanted to write and thank you for being such a welcoming mentor over the past three months.

I have felt very lucky that you have been so helpful at the start of this job and supported my progress and confidence as I have become more used to this new role.

Results

The pre-programme survey noted only 18% of Resident Drs having enough information during their induction.

Post-intervention survey increased this to 100%. Confidence about their role has increased from 25% to 100%.

Despite the increase of confidence for starting on-calls, there was still remaining anxiety noted about the complexity. All doctors scored for anxiety about the on-calls in the pre-questionnaire. Post-intervention feedback noted remaining anxiety due to the size of the site. The programme enhanced the preparedness for on-calls by 57%.

Feeling welcomed had increased from 60% to 100% by the end of the programme.

An incidental finding was that 75% of doctors that was part of this intervention have moved onto higher grade roles by the end of the QIP. This included both internal and external roles.

Discussion

Buddy programme had a positive impact on the new resident doctors. There are identified areas for future improvement. Despite reduction, the doctors continue to report anxiety and raise concerns around the impact of medical emergencies. The organisational changes of the size of the site are likely to aid with one of these.

The incidental finding surrounding 75% of doctors moving onto other roles during the course of this QIP also require further analysis.

Conclusions

Buddy programme had an overwhelmingly positive effect for new Resident doctors.

The remaining areas to explore in the next PDSA cycle include further analysis of the complexity of cases during on-calls. Additionally looking into the turnover rate of non-consultant doctors, and analysing this area further.

Thank you for the space and time you made to listen to my queries and discussed solutions openly with me.

Acknowledgements

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