Update from the Future Hospital Programme

About this section

This part of the *Future Healthcare Journal* is where you will find regular overview updates on progress made by the Future Hospital Programme of the Royal College of Physicians, together with its partners, in realising the vision of the Future Hospital Commission.

We very much welcome your feedback. If you have any comments, or would like to be involved in the work of the Programme, please contact futurehospital@rcplondon.ac.uk.

Follow the Future Hospital Programme on Twitter: <https://twitter.com/RCPFUTUREHOSP>

Synopsis

The Future Hospital Programme (FHP) was established by the Royal College of Physicians (RCP) to implement the recommendations of the Future Hospital Commission report, including its 11 principles of patient care. This is the last update from FHP before the launch of its final report on 23 November. This update contains news from the independent evaluation team, an update on the eight Future Hospital development sites and learning from the successful chief registrar pilot.

Introduction

Over its 3-year tenure, the FHP has achieved a great deal, including piloting the role of chief registrar, collaborations with eight Future Hospital development sites, building a Partners Network for those involved in quality improvement and change management, and supporting integrated care services for diabetes patients in Oxfordshire.

On 23 November, the FHP will be hosting a celebratory event, showcasing the successes from these innovative projects and launching a comprehensive report detailing the impact of the Future Hospital Commission-aligned principles of patient care. The RCP will also announce its plans for taking the work and learning from the FHP forward through its Quality Improvement (QI) Hub. The QI Hub is looking to further support its members in achieving their local improvement aims and provide teams with practical support to influence the levers that will engage front-line staff and their patients and carers in continuously improving the quality and value of healthcare.

Future Hospital Programme independent evaluation

This year, the FHP commissioned the Department of Health Services Research and School of Management at the University of Liverpool to undertake an independent evaluation of its work.

The team at the University of Liverpool have:

- > met with the eight Future Hospital development site teams to understand the impact of the FHP on patient care
- > held workshops with patient representatives from each of the development sites to hear directly about their experience of involvement in service redesign and improvement
- > interviewed colleagues at the RCP to understand their perceptions of the FHP, what they consider to be its successes and challenges
- > surveyed RCP members and fellows to clarify their perceptions of the programme and its work.

The Liverpool team will publish their findings in autumn 2017. The report will address the effectiveness of the FHP in achieving its aims of improving care for patients and applying the FHC's recommendations to clinical practice. This independent report will be used to inform the FHP's own report.

Future Hospital Programme development sites

May 2017: Delivering the Future Hospital

All Future Hospital development site teams – multidisciplinary teams of clinical staff, managers, hospital analysts and patients who are involved in local quality improvement projects to improve patient care – met in Liverpool to network and share learning. It was the last opportunity for the sites to meet before the FHP transitions its work over to the RCP QI Hub from December 2017.

Development site final reports

All eight sites are working closely with the FHP team to consolidate their learning from their time as Future Hospital development sites. Their individual insights – including successes, challenges and outcomes – will be included in the FHP's final report due to be published on 23 November.

RCP chief registrars improve patient care

Chief registrars are senior medical trainees working to build stronger leadership skills through the RCP's bespoke development programme (Box 1). In 2016, the RCP began piloting the chief registrar scheme and the scheme is continuing to grow from strength to strength.

As key members of the medical workforce with protected time (minimum 40%) dedicated to leadership and improvement, chief registrars improve patient care by engaging with both clinical and managerial colleagues (Fig 1). A recent independent evaluation carried out by the University of Birmingham found chief registrars:

Box 1. Improving staff morale

During his time as a chief registrar at Hampshire Hospitals NHS Foundation Trust, Tahir Akbar led a number of projects that improved junior doctor morale, from refurbishing the doctors' mess to improving the medical handover process. 94% of junior doctors would now recommend their job to others (compared with 10% previously) and there has also been an 80% year-on-year reduction in the junior doctor sickness rate.

> improve services

Chief registrars work across teams to improve the quality and efficiency of services.

> enhance patient safety and experience

Chief registrars work to directly improve patient care, but also address some of the indirect factors that can have a negative impact, such as low staff morale and rota gaps.

> develop new skills

Chief registrars become confident leaders and develop skills that provide a solid foundation for future leadership roles.

Chief registrar recruitment

Recruitment is now open for the 2018/19 phase of the chief registrar scheme. Email Natalie Pink, project manager, at chiefregistrar@rcplondon.ac.uk to register your interest in recruiting a chief registrar or finding a post.

Fig 1. Chief registrars celebrate their achievements at the 2017 showcase event at the Royal College of Physicians.

Integrated care: learnings from Oxfordshire diabetes project

The FHP has been supporting a team in Oxfordshire to develop and implement an integrated service model for diabetes care. The Oxfordshire team aims to provide high-quality diabetes care to the whole population, independent of where patients live and which diabetes service they use.

The current model of diabetes care in Oxfordshire does not always support the aims of integrated, seamless care. Patients often move between primary, community and specialist care and the complexity of patient's needs are not always addressed. This leads to fragmented care for patients and inefficiencies for services, with interventions sometimes being delayed or duplicated. In the summer, the FHP hosted two events to disseminate learning to colleagues interested in integrating care.

> Integrated care: exploring the barriers and facilitators

In a live-streamed panel discussion, chaired by Professor Frank Joseph (Future Hospital officer), specialists and GPs from Oxfordshire explored some of the barriers and facilitators to integrated care.

You can watch the recorded discussion on the RCP website: www.rcplondon.ac.uk/implementing-integrated-diabetes-care-oxfordshire

> Future Hospital: journey to integrated care

We invited a mixed audience of physicians, GPs, commissioners and patients to participate in an in-depth look at some of the key areas of concern for integrated care services for long-term conditions. Using the experience of the Oxfordshire team as a springboard, we explored issues relating to:

- > patient engagement
- > governance and finance
- > clinical engagement
- > IT integrated, training
- > leading across boundaries.

The resources from the day can be downloaded from the RCP website: www.rcplondon.ac.uk/projects/outputs/future-hospital-journey-towards-integration

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