

WeCaRE: A framework for improving the working environment for doctors in training building upon the Professionalism Compliance Analysis Tool (PCAT)

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Introduction

A safe, healthy working environment and effective training are vital for quality training posts. NHS Scotland uses the Professional Compliance Analysis Tool (PCAT) to improve rota design. This project introduces an alternative framework, WeCaRE: Wellbeing, Conditions and Rota Evaluation, which prioritizes patient safety, training quality, and trainee wellbeing, recognizing that quality training extends beyond compliant rotas.

Method

The WeCaRE method follows a structured five-step process.

- 1. WePlan: Involves forming a team, establishing a shared vision, and creating a survey for trainees on MS Forms. The team includes trainees' representatives, consultants as well as rota managers. Survey includes ranking multiple-choice questions covering various areas of training as well as open text responses. There were specific questions for each grade of trainee.
- 2. WeListen: Survey is circulated for trainees to complete, providing feedback.
- 3. WeShare: We collate and presents the results to the team involved
- 4. WeCreate: Where discussions lead to implemented changes.
- 5. WeFinish: Includes a follow-up survey to evaluate the success of improvements.

Initially piloted in General Surgery in July 2022, and continued since, the survey has gathered both quantitative and qualitative data, with findings shared with senior clinicians and rota managers, leading to targeted improvements. Repeat surveys have been conducted to assess the impact of these changes.

Results

- The first survey in October 2022, with 25 responses, showed positive feedback on handover, induction, audit opportunities, teamwork, and job satisfaction.
- Areas for improvement included rest periods, access to theatre and endoscopy training, and staff wellbeing initiatives.
- People believed they were not assigned to lists in theatre appropriate to their level
- There was also considerable burnout reported at 36% of trainees

Changes made in response:

- Massive change in rotas including change of shift length in junior middle grade roles
- Expanding PA/ANP cover during in hour work
- Increasing number of staff out of hours to help accommodate cross cover of other specialties out of hours
- New level 0 theatre lists created for surgical trainees allowing them to have opportunity as the primary operator

Following survey in December 2023 following implementation of changes showed a decrease in reported burnout from 36% to 19%. There was good response to the new theatre list with 60% of participants stating it was helpful in their training.

Ongoing changes

We are currently in the process of actioning change from our most recent survey performed in November 2024. Areas for improvement identified include:

- Time off for teaching days for Core Trainees
- Access to endoscopy for Registrars
- Opportunities for FY doctors to engage in clinics/theatres
- Further optimizing Level 0 theatre allocations based on grade



Figure 1: Diagram showing the WeCare Method

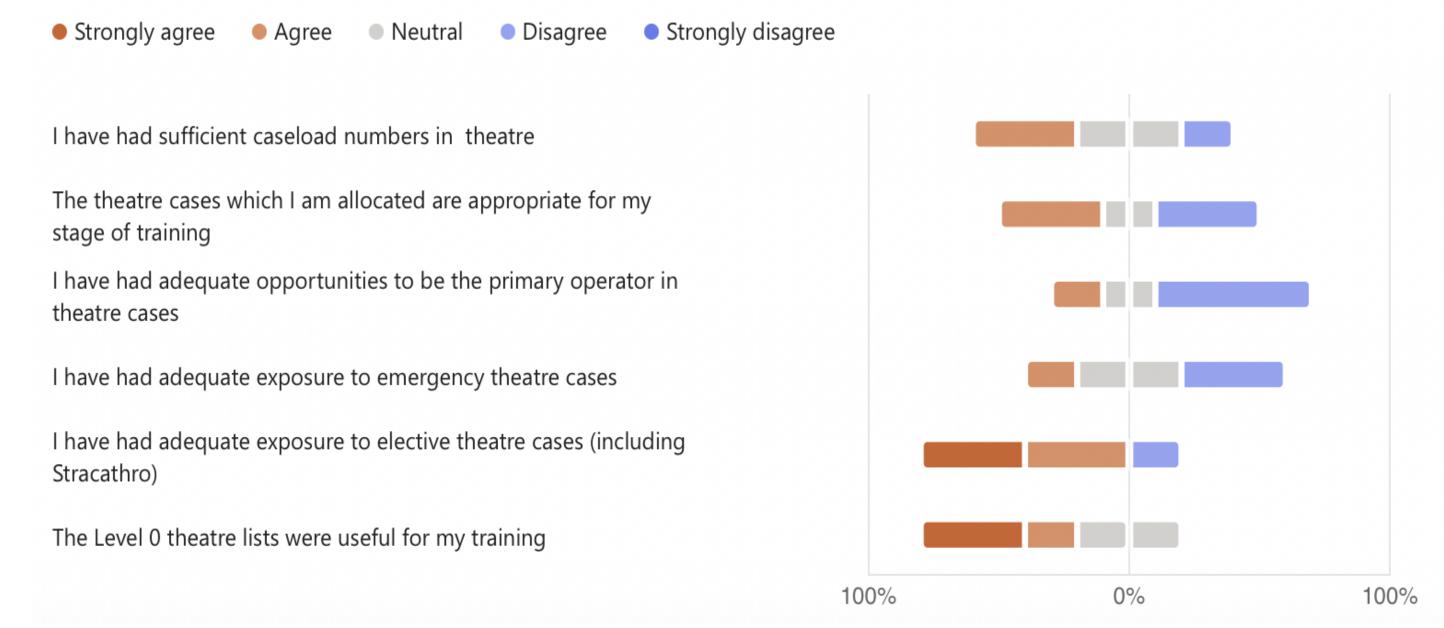


Figure 2: Chart showing response in December 2023 of 60% of participants stating the new training theatre lists were helpful for their training after it's initiation

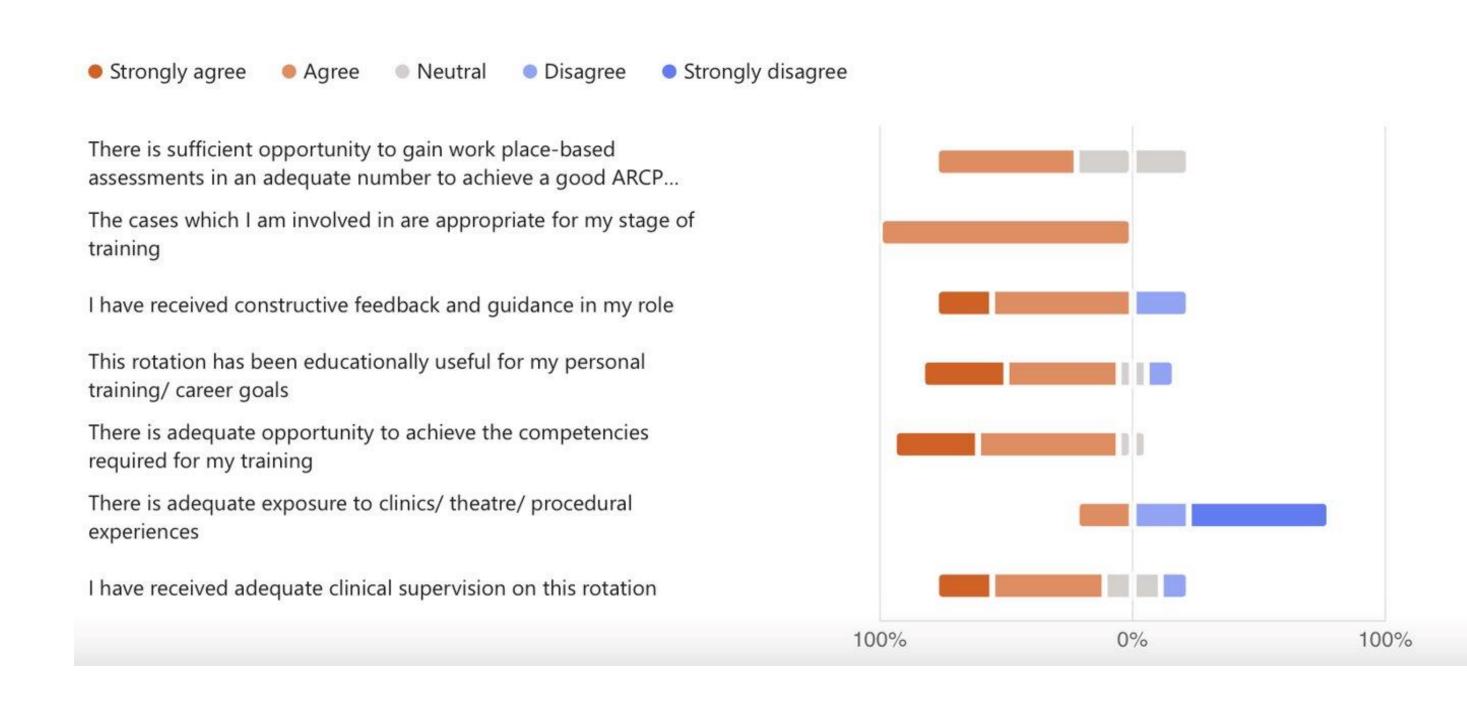


Figure 3: Chart from most recent survey in November 2024 showing responses from FY1 doctors, outlining inadequate exposure to clinics/theatres but otherwise great responses in training oppurtunity

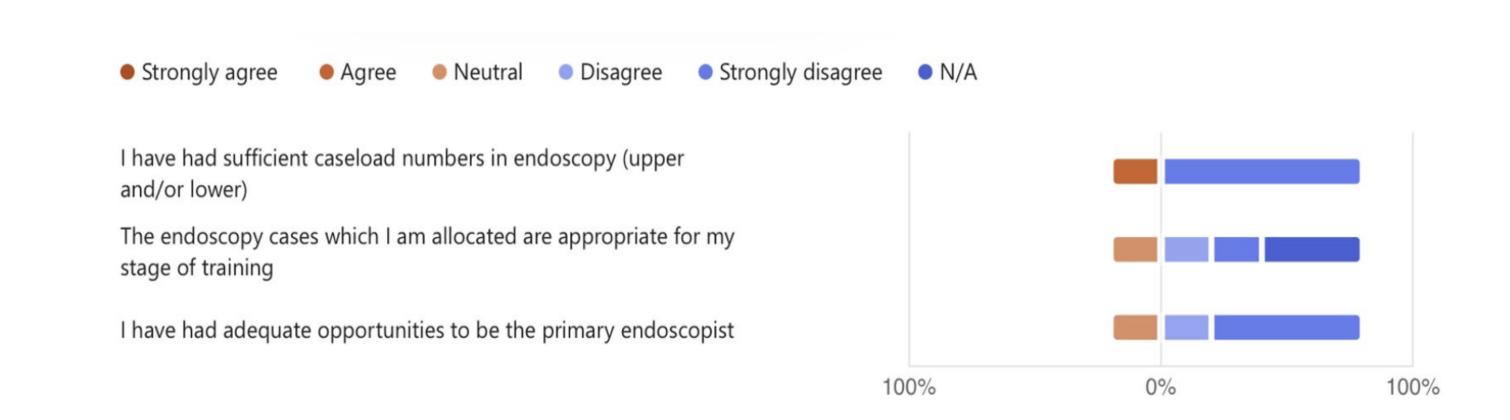


Figure 4: Chart from most recent survey in Novemeber 2024 from Registrars outlining inadequate exposure to endoscopy

Conclusions

The WeCaRE framework effectively assesses and enhances training, allowing trainees to voice concerns anonymously. This provides a structured approach to find ways to improve trainee experience, expanding beyond changes to the staffing rota.

References

- 1. https://www.med.scot.nhs.uk/resources/quality-and-
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- 2. Robinson CH, Damschroder LJ. A pragmatic context assessment tool (pCAT): using a Think Aloud method to develop an assessment of contextual barriers to change. Implement Sci Commun. 2023 Jan 11;4(1):3. doi: 10.1186/s43058-022-00380-5. PMID: 36631914; PMCID: PMC9835384.

