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563 Help! I’m Starting Surgery: An Educational QI Project to Improve the Surgical Induction Process and FY1’s Confidence in Starting Surgery at Bolton Hospital

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Introduction: The surgical induction process for FY1’s at Bolton consisted of 280-pages of pre-reading and a series of short talks delivered on their first day. Foundation doctors were surveyed (n=20) and only 25% were satisfied/very satisfied with this process.

Aim: To improve satisfaction ratings and junior doctor’s confidence in surgical skills required to be a competent surgical FY1 through a series of PDSA cycles.

Method: PDSA Cycle 1: Creation of the survival guide. PDSA cycle 2: Pre-reading was condensed into the survival guide and a 12-week teaching programme was introduced. PDSA cycle 3: The induction agenda was updated, and a tour of the department was added. PDSA cycle 4: Introduction of a Q&A session with a previous surgical junior.

Results: Through the above cycles (PDSA Cycle 1-5) satisfaction ratings improved from 25% to 41%, 28%, 83% and 85% respectively. Junior doctors’ confidence increased on average from 41% to over 90% in each cycle. These skills included: requesting scans, consenting for endoscopy, prescribing, assessing unwell patients, clerking, and managing and explaining post-operative complications.

Conclusions: Following the creation of the survival guide, eradication of extensive pre-reading and the above PDSA cycles, satisfaction ratings improved and FY1’s confidence in surgical skills increased. The findings of PDSA cycle 2 could be attributed to the pandemic as induction took place on Microsoft teams rather than face-to-face. To ensure future sustainability, the guide and induction process should be updated and analysed every rotation.