

Visionary Fellowship Report 2020/21 - George Smith

With somewhat of a blank piece of paper when it came to the start of my visionary fellowship, I repeatedly looked at the 'brief' which I reviewed prior to application – and thought how am I going to make this work? As like most things it came about in an organic way after a bit of table tapping.

I was involved in assisting in overseeing the 'virtual doctors mess' (VDM), a Microsoft Teams channel where SWFT consultants and local GPs were able to interact. This provided an opportunity for doctors to ask questions, fact-find, and feedback. It utilised digital systems to enable interaction at a time when it felt like many of us were working 'alone'. It was great to see prompt responses with effective outcomes improving patient care, this project had a high yield for very little technical investment. I have kept a spreadsheet of the items raised and the outcomes, this demonstrates the benefits achieved. This is an ongoing project as the channel remains open, of benefit to those that are utilising it on a weekly basis in some cases.

A project/piece of work that was somewhat polar opposite of the Teams channel was assisting SWFT in relation to looking at electronic results acknowledgement. The IT projects team had been undertaking a piece of scoping work in relation to how they currently handled electronic results, and what they needed of a future clinical IT system. Because the process likely varied by team, let alone speciality, this is a potential mine-field. I hope my role in this project enabled them to see a bit more clearly the challenges in front of them, and how robust business processes and training are essential.

A piece of work that fed into the VDM Teams channel was assisting one of the SWFT clinical education fellows on producing a document that set out how to refer/discuss a patient with each respective medical and surgical speciality at SWFT. There were many identified benefits to this including reducing admission pressures and ensuring timely patient care for patients. We had this attached to the teams channel as a resource that people could refer to.

A project I was involved in at the inception and that remains open is for radiology requests and results. Whilst we moved to electronic requests and results with pathology lab interface links some time ago, this has not happened for radiology for a variety of reasons. The COVID-19 pandemic and new ways of working has increased the appetite and accelerated discussions regarding how this can be done for radiology. I have met with respective representatives for SWFT (radiology service provider), the LMC and the CCG. In my capacity as an IT visionary fellow I was appointed SRO (senior responsible officer) for this project, something I would like to think one of the new fellows in cohort 2 will inherit and see to fruition.

The fellowship programme that I have undertaken has been great for many reasons in my first year post CCT. It has allowed me to increase my knowledge and understanding of how healthcare is delivered locally. This knowledge, when utilised, can benefit patients by knowing the best ways to deliver care for them and shape future healthcare delivery for the better. Another benefit is that it has enabled my working week to feel less one-dimensional, variety is the spice of life after all. I have found that the knowledge from a project meeting on a Monday for example has allowed

me to then do things a bit differently for the benefit of a patient later that week. Personally to have been awarded a fellowship has been great for my own self-confidence knowing that I have been identified as having qualities that can be utilised for the benefit of the wider healthcare environment. In addition I have to say that the monthly fellowship forum meetings were a great opportunity to share and offload safely with my peers.

If I were going to outline my top 3 achievements in the last year, they would be; firstly being entrusted to oversee the VDM channel, interacting with consultants who taught me at medical school and who I worked for in my first years as a doctor was a bit of a surreal experience to begin with I have to say. Secondly, utilising previous professional experiences as an IT healthcare consultant for the benefit of services locally was also fantastic. The synergy of both my medical experience and IT healthcare knowledge was what I always wanted to get to doing, and this past year has genuinely felt like it has been realised through the fellowship programme. Thirdly, it would be applying for a CCG advisory role, I did not get it but I suspect I would not have been even considered, if it were not for this fellowship. The fact that I got to interview I count as an achievement.

Looking forward I see myself involved in change projects at a local or regional level. I don't see myself as being particularly academic and over the years my attention span has diminished somewhat so I couldn't see myself doing a Masters/MBA. I would also like to see IT healthcare being integrated into medical education and training pre and post qualification. The shaping and delivery of this is something that I would love to be a part of. Be it within consultation skills or public health/epidemiology, how we interact with patients digitally and capture this activity has so many benefits and outcomes around primary/secondary disease prevention, and funding for services.

The projects I have been involved in have improved patient care, efficiency and safety through 1) increased collaboration between GPs and their respective hospital consultant colleagues and 2) more robust ways of sharing information. Anything that can demonstrate these and improve the sense of connectedness between colleagues and teams is a good thing in my book. With remote consultations, I have found the day job a rather lonely existence at times just one year in. Ways to mitigate this going forward are definitely value added.

In the past year I have heard time and time again from senior colleagues that this opportunity I have had is something they would have loved to have had previously. In summary, I believe these fellowships are fantastic and unique opportunities to upskill those in the early stages of their chosen field with demonstrable benefits to the local healthcare network now and for the foreseeable future.