

Royal College of Physicians Medical Registrar Survey 2017

This survey is being carried out by the Safe Medical Staffing Working Party of the Royal College of Physicians with the approval and assistance of the JRCPTB, and the support of the Royal College of Physicians of Edinburgh and Royal College of Physicians and Surgeons of Glasgow.

The Safe Medical Staffing Working Party

Whilst there is a general appreciation that the levels of medical staffing have fallen dangerously low, there are no benchmarks against which to compare the current levels. This working party is designed to define such benchmarks for a variety of clinical situations, responding to the statement below made by the Royal College of Physicians in 2013

“The RCP should work with the NHS to provide guidance on acceptable staffing levels for a given workload, including the optimum number and appropriate grade of junior doctors necessary for a given volume of admissions, case mix, number of inpatients covered, and support provided for other specialties”

(Royal College of Physicians. *The medical registrar: empowering the unsung heroes of patient care*. London: RCP, 2013. Pvii)

The Medical Registrar Survey

The purpose of this survey is to try and identify the nature and volume of work undertaken by middle-grade medical staff when on-call for general medical issues, but specifically excluding work directly relating to the medical intake and associated activities such as DVT or TIA clinics.

By taking part in this survey you will provide us with an understanding of the work that you do in the various parts of the hospital at different times of the day and night when you are on-call. Having this information will help us to make clear recommendations for the number of doctors or other staff needed to ensure safe, timely and effective emergency care for patients whilst providing satisfactory working conditions for the Medical Registrars themselves.

Some definitions and explanations

- **The Medical Registrar**

We consider the “Medical Registrar” to be the most senior member of resident medical staff, reporting directly to the consultant on-call. Most of the staff acting in this role will be medical Specialty Registrars, but as other doctors can also fill this role, for simplicity’s sake we have chosen to use the term *Medical Registrar* to describe any member of medical staff meeting the definition above.

- **The format of the survey**

We consulted with the Trainees Committee of the RCP when drawing up this survey and it incorporates their recommendations. We have provided the survey in both a paper-based format and also on-line. We have accepted their suggestion that we request the identity of the respondent’s hospital – we have chosen its post code – as an alternative to details of that hospital’s bed numbers. We are not seeking to identify hospitals other than as a route to determining their bed numbers. We wish the survey to be as anonymous as possible and are making no effort to discover the identity of respondents.

- **Types of work undertaken by the Medical Registrar when on-call**

Whilst it would have been fascinating to know the detail of every task carried out by Medical Registrars when on-call for the wards, this would be extremely demanding to collect and is not necessary for our work. To plan staffing numbers we need to know if the work carried out on-call is appropriate for Medical Registrars, how long it takes and if there are other, possibly better, ways of managing these patients' problems.

To acquire the information that we need, we have divided the tasks that are undertaken by Medical Registrars on-call, managing existing in-patients, into four categories:-

- **New work** - A new problem or an unanticipated issue with an in-patient's known medical problem. This would be entirely appropriate work, provided that it was truly unheralded.
- **Handover work** - Previously requested continuing management of an in-patient's known medical problem. This again would be appropriate work, provided that it was not a last minute delegation of a problem which initially arose earlier in the working day.
- **Legacy work** - A problem arising in an in-patient which should have been identified and for which management could have been started by the ward's day staff during the working day.
- **Non-clinical patient related work** - Non-clinical administrative work for patients who have been previously admitted. Bed management would be an example of such work.

We request that respondents identify the category that best describes the task that they are reporting and *emphasise that the identification of legacy work not undertaken by day staff does not imply any criticism of those staff. We strongly suspect that there may well be staffing problems on the wards by day as well.*

- We would value your opinion of the workload you faced during the time that you reported. Was it light, reasonable, heavy or unacceptable and hazardous to patient safety?
- We also wish to determine to what extent the work of the Medical Registrar on-call involves patients in non-medical disciplines. Better medical involvement with these patients during the working day might reduce this workload on-call.
- When reporting any delays that you incurred in responding to the tasks reported, we consider an excessive delay to be one that hazards a patient's comfort and an unacceptable delay to be one that hazards a patient's safety.
- We want to know whether you feel that some of the tasks that you undertake could be carried out by other clinicians, either more junior doctors or alternative staff such as Nurse Practitioners (**Nurse Pracs**) or Physician Associates (**PAs**).

Please complete **Form A** providing us with your background information and **Form B** giving details of up to *eight consecutive* tasks undertaken by you when on-call.

If you have completed the survey on paper, please return hard copies of both **Form A** and **Form B** by post (not email please) to the address in the **Instructions** section of **Form A**

Dr Rhid Dowdle – Chairman of the RCP Safe Medical Staffing Working Party