



**BMA**

# **RJDC report on regional engagement: Sharing good practice to increase participation**

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British Medical Association  
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## Letter from the Chair of committee



### Dear Members and Colleagues

As chair of the National Committee of Regional Junior Doctor Committee Chairs, I am passionate about how we engage and support our members at a local level.

During industrial action, we saw an unprecedented increase in the number of members engaging with our committees and huge growth in the number of representatives working locally to improve the day to day lives of junior doctors. We want to harness those changes, and build up local networks of doctors who can work to bring about local change on the ground, and gather the views of their colleagues and peers so that as an organization we reflect even further the views of you, our members.

In taking up the role this year, I was conscious that we had a long journey ahead of us. This report is a first step. An acknowledgement that where we are now, is not good enough, and a commitment to improve.

The BMA is a membership organisation, and the Regional Chairs in my committee, are committed to working with members locally to bring about positive local changes in the trusts where they work; from Peninsula to Tayside and beyond we want to find ways to engage and support you, our members, to make working as a junior doctor in our NHS a more positive experience.

In addition, we want to find new ways to work with members and grow our regional networks, so that we can better represent your views, and ensure that the views we bring to JDC are a true reflection of what you, our members want to see happen on the national stage.

We have a long way to go, but with your help, we can bring about a better BMA.

A handwritten signature in black ink, appearing to be 'Zoë Greaves', written in a cursive style.

**Dr. Zoë Greaves**  
Chair, National and Regional Junior Doctors Chairs Committee (NRJDC)

## Introduction

At the first meeting of the National and Regional Junior Doctor Committee chairs (NRJDC), it was agreed that a review of the levels of engagement for each of the regional JDCs should be undertaken. This report examines the levels of engagement based on information provided by regional Chairs in collaboration with their industrial relations officers (IROs). Chairs were asked to provide information on regional meeting attendance, gaps in local negotiating committee (LNC) representation, current methods of engagement and communication, the success/failure of previous measures taken to improve engagement and the support that is required from the BMA to promote the work of the regional committees and encourage attendance and participation.

## Attendance at meetings and participation in elections

It was recognised by most Chairs that there had been a spike in meeting attendance last year because of the industrial action around the 2016 contract but there had been reduced attendance recently. Regular meeting attendances varied across the regions with some regions having no more than 4 or 5 regular attendees and no region having >15 regular attendees. For some regions, these numbers still exceeded meeting attendance prior to industrial action, and this had been sustained over the last year, for others, levels had fallen to that of pre-industrial action.

Attendance at regional AGMs was also variable. In some regions, the figures for AGM attendance were broadly similar to those for regular meetings while in other regions there was a higher number of attendees at the AGM than other meetings in the year. The level of participation in elections for positions on the RJDC and UKJDC also varied from one region to another. In most regions, the elections to positions on the committee were contested which is a slight improvement on previous years but there remain quite a lot of uncontested positions in regions where attendance is low. Positions which conferred membership of the national JDC were typically more likely to be competitive.

In the most recent elections, voting for positions in East Midlands was trialled online which resulted in an increase in voting numbers by comparison to the previous year though attendance at the AGM was down on the previous year. It is not yet clear, whether or not this will result in increased engagement year-round.

There is a clear issue with facilitating attendance via videoconference. In some regions, videoconferencing was not available at all at the meeting venue. In regions where videoconferencing was available there were often difficulties with Scopia connections and the audio/visual facilities were inadequate. Some Chairs reported that they had used Skype as an alternative to Scopia which worked much better in terms of connectivity. However, this was often limited without access to a screen, meaning that if quite a few members attended via Skype it was difficult to see them/acknowledge their input as they only appeared on the IRO's laptop screen. Adequate videoconferencing facilities at the meeting venue was identified as very important in increasing attendance and engagement, particularly in large geographical regions.

## Communication

Chairs outlined the communication channels currently used in their regions and their effectiveness. Several regions had WhatsApp groups which were useful and where issues arising at a local level could be raised informally and where discussion could take place between meetings. Most regions had a regional Listserv which they used to circulate information to junior members in their region though there were varying levels of engagement with Listserv from region to region and reach was limited to those who had signed up previously. Chairs suggested that a mailing list of junior members in the region would be beneficial in promoting the work of the regional committee and encouraging attendance at meetings and some Chairs made use of the Lotus Notes RJDC pages to circulate information to all juniors in their region. Having a standard html template that Chairs and IROs could use for newsletters that was more eye-catching and impactful than plain text emails was a preferred option. The Chairs of Yorkshire and Northern committees have already begun to send more stylised newsletters to members in their regions.

The use of social media platforms has been beneficial in engaging members in some regions. Facebook groups and pages (including the Junior Doctors Contract Forum) along with Twitter accounts were good ways for members to raise issues and for committee officers to disseminate information.

It was important that face to face communication between reps/IROs and members took place at the JDF meetings in every Trust. Specific engagement events across the region that are heavily publicised locally were recommended as a means of informing members about the work of the regional committee and promoting participation and attendance at committee meetings. The West Midlands committee are hosting three 'listening' events across the region with the feedback from the first event held at UHB very positive and over 30 members attending.

## Improving engagement – successes and failures

Chairs were asked to outline the measures that had been taken to improve engagement and participation in their regions and whether these had been successful or not. The table below outlines the collated responses for both.

Successes	Failures
Using social media	Rotating venue for meetings
All member emails	Listserver as unclear who is getting emails
Promoted online voting by posters, email, texts, reminders	Social media accounts not handed over properly
Redesigned regional newsletter	Inability to send redesigned newsletter via BMA regional site
Increased number of LNC reps and more engagement from reps	
Accessible venue and catered meetings (including good VC facilities)	
Highlighting BMA successes locally	
Dates and times of meetings agreed in advance and publicised	
Posters with meeting info on them	
Held an additional meeting to feedback outcomes from ARM	
Meetings held at a central location with good transport links	
LNC rep training	
Guest speakers	

## Further support from the BMA

Several areas where the BMA both regionally and nationally could provide more support were identified.

More funding for regional engagement events and for RJDCs to make use of generally was advocated by several Chairs. It was also expressed that greater support from the communications team at BMA House in making best use of social media channels, designing newsletters, pushing out positive success stories and producing posters advertising the RJDC meetings would be welcome.

Ensuring that meetings were held in central locations with adequate videoconferencing facilities was raised by several Chairs. It was also important that IROs had proper equipment for videoconferencing.

A proper handover for new Chairs to ensure continuity and a one to one phone call between new Chairs and IROs to discuss the role and available resources would be very beneficial.

The training for LNC reps and attendance of both BMA staff and reps/committee members at induction events were both seen as contributing to better visibility and engagement and should be continued.

## Devolved Nations

Each of the devolved nations has its own National JDC with devolved decision-making responsibilities. Scotland, as the largest of these, has a network of four RJDCs: Tayside, North, West and South-East Scotland. Each of the devolved JDC chairs, and the four Scottish RJDC chairs were asked to contribute to the report, and of those who responded, the findings tallied with those of the English regional chairs. The trends that emerged from our devolved nation committees have therefore been covered in with the bulk of this report, to avoid unnecessary duplication.

## Wider issues

Although the information in this report is largely gained from a proforma sent to chairs and IROs the committee has received feedback more widely including from social media, via issues raised at JDC and NRJDC meetings and through direct communications with the chair and secretariat.

There is an acknowledgement both by our RJDCs and our members that we need to be better at garnering the views of members as to the issues that JDC is facing nationally and where doctors have access to networks of communication with their RJDC they largely feel able to share their views, when they wish. However, those that are linked into networks are a minority and local representatives, though keen to expand these networks often struggle to do so.

Another issue that has been repeatedly raised is one of awareness. Many junior doctors have little or no awareness of the role of LNCs in the trusts they work in, the role they can play, and the route by which to raise issues when in a trust. There is a real desire for this information to be shared in an accessible format, from the earliest stage in a doctor's career, so that doctors are equipped to address any problems they face in their working life.

## Summary

- Meeting attendance and levels of local engagement have fallen since industrial action, however, for some regions engagement levels are still markedly above those of pre-industrial action times, and appear to be still at this level.
- Chairs and local executives feel that they are limited by technologies available to them, and this limits and harms their ability to communicate, engage with and support members locally.
- Consistency of handover was also highlighted as a problem for LNC reps at trust level and support is needed to ensure that networks built are not lost as juniors rotate from trust to trust.
- There is potential for the use of online voting to improve engagement with local elections, but it is not yet clear whether this impacts upon wider engagement with issues, and improved ability to garner member views on issues pertinent to JDC and junior doctors more widely.
- More work is needed to raise awareness of local structures – especially LNCs – and of the role of the LNC rep within the trust, so that doctors know where to go and who to raise problems with.

## Action Plan

- Explore the effect that electronic voting in AGMs has upon engagement throughout the year, with a view to wider roll-out if it has proven effective.
- Work with Comms and IT to strengthen regional communications and equip our reps to better communicate with members
- Work with our IROs and regional staff to develop systems of handover, so that when reps rotate around trusts, existing networks of communication aren't lost
- Work to ensure a better presence at regional and trust inductions so that members are more aware of the local support available and can link up with local networks to stay informed.

## Appendix 1 – Regional engagement pro-forma for Chairs/IROs

Region/Nation	AGM Attendance	
Average attendance at meetings (excluding AGM)		
Competition for Regional/DN Exec/JDC seats		
Number of hospitals without LNC Reps		
Number of JDC seats occupied by newly engaged members		
Was VC/TC available at most recent meeting		
Please describe means of communication/engagement used to disseminate and gather information for local members		
Please describe level of engagement from members between meetings		
Please describe previous measures taken to improve committee engagement and attendance	Successes	Failures
Other comments on local engagement		
What can the BMA do to support you further in your role		

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