

PROBLEM

Lack of knowledge amongst trainees and consultants about their new RCPCH curriculum means they will be unprepared, disadvantaged and unaware of the requirements.



IMPROVEMENT AIM

For all paediatric trainees and consultants at North Middlesex Hospital to be aware of the new RCPCH Curriculum and feel confident to use it.

UNDERSTANDING THE PROBLEM

- In March 2018, London School of Paediatrics introduced the new RCPCH Progress Curriculum to Trust Representatives and College Tutors.
- There was a crucial need to prepare trainees and trainers at North Middlesex Hospital for the launch of "Progress" on 1st August 2018.

BASELINE MEASURE

Survey of knowledge and confidence to use the new RCPCH curriculum was sent to paediatric trainees and consultants on 18th April 2018.

0% felt confident to start using new curriculum in August

100% thought teaching sessions on new curriculum would be useful

CHANGE IDEAS (PDSAs)

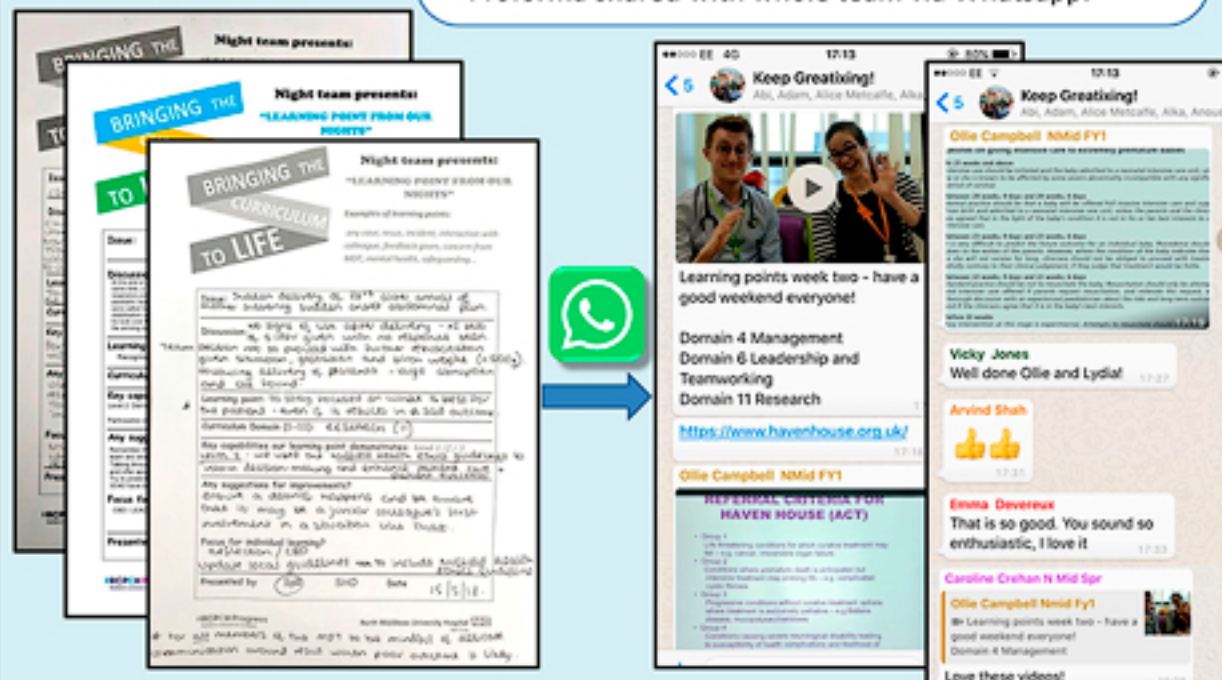
Initiatives for "Bringing the Curriculum to Life" focused on identifying learning in everyday experiences and ways to share this with our teams.

1. Presentations: Raise awareness of the curriculum

- College Tutors and Trust Representatives planned sessions to inform trainees and consultants of the new curriculum, introduce them to resources and discuss the initiatives planned to increase their understanding.

2. Learning tool: "Learning points from nights"

- Proforma developed for the night teams to discuss a key issue on Monday morning at the neonatal and general paediatrics handovers every week.
- Learning points were mapped to the new curriculum with suggestions for improvement or further reading.
- Proforma shared with whole team via Whatsapp.



3. Video shorts: Consolidate learning points

- Short videos created weekly highlighting "Learning points from nights" and other interesting paediatric teaching.
- Learning points were all mapped to the 11 curriculum domains with links to further reading and resources.

4. Focus: Evidence of key capabilities

- After six weeks of exploring the 11 curriculum domains the focus of our weekly discussions and videos was shifted to understanding, demonstrating and evidencing the mandatory key capabilities for trainees' progression.

5. Sharing tools: Facilitate wider adoption

- QI project shared at Trainees' Committee Meeting in May and resources given to interested tutors and reps.
- Online Trello platform to share learning points, videos, resources and links for further reading.

RESULTS

Regular communication to engage the team and gathering weekly feedback on our PDSA cycles helped identify interventions worth sustaining. "Learning points from our nights" was the most effective innovation followed by the videos.



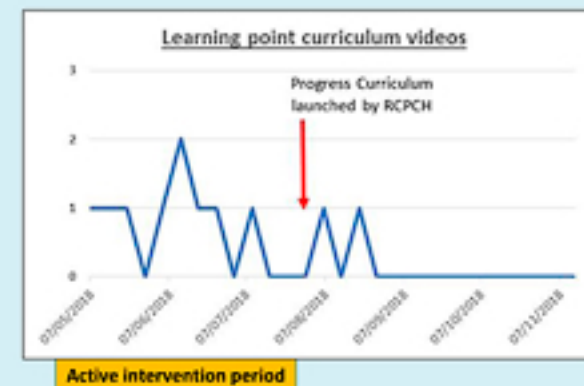
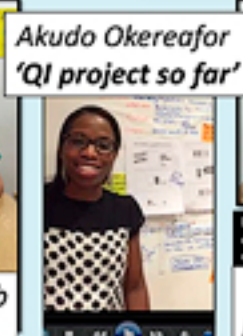
Summary of PDSA cycle 2:

PDSA 2a: Learning tool template 2x week

PDSA 2c: Send reminders Sun night

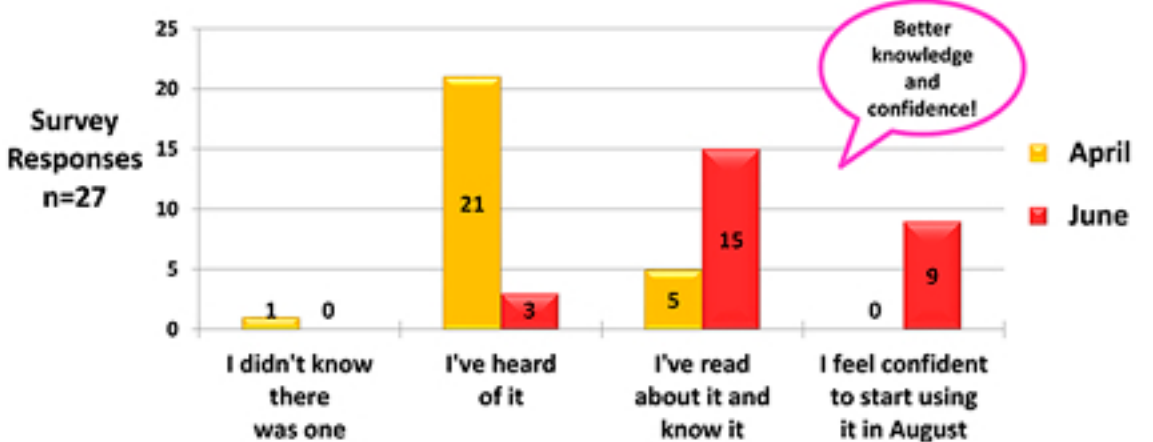
PDSA 2b: Feedback for discussions 1x week

PDSA 2d: Night team present, day team fill and send out



DATA AFTER CHANGE IDEAS

How much do you know about the new RCPCH Progress curriculum?



Increased knowledge and confidence to use the new curriculum was demonstrated by 27 trainees and trainers in the April and June surveys. "I've heard of it" fell by 19. "I've read about it and know it" rose by 10. There was an upsurge in "I feel confident to start using it in August" as nine reported substantial progress following our improvement ideas.

REFLECTIONS

- Driver: a need to understand and know how to use the new RCPCH Progress curriculum ahead of its launch in August.
- Change ideas mapped to the new curriculum helped paediatric trainees and consultants increase their curriculum knowledge and confidence.
- Developing a habit of reflection after night shifts facilitates
 - Discussions about decision-making and autonomy.
 - Identification of real-time problems.
 - Promotes team feedback and cohesion.
- Sharing weekly learning points and bite-sized learning videos via WhatsApp and stored on an online Trello learning platform gave benefit regardless of doctors' shift-patterns.
- Collaborative learning increased our departments' collective knowledge, encouraged evidence-based learning, improved our professional development and ultimately enriches patient care.