



Research, Evaluation & Audit for Child Health

# A Pan-London Junior-Led Paediatrics Research Network

Dr Eva Loucaides ST5  
REACH founder and co-chair

# Research exposure in training



## Clear need

- for research active paediatricians  
(Turning the Tide,  
RCPCH UK workforce census,  
Academic Medical Sciences Report)
- for research literate paediatricians

## Clear mandate

- GMC, Progress +
- RCPCH trainee charter

## How?

- IAT
- OOP
- **Within training**

## Many barriers

- Protected time
- Rotational training
- Prolongation of training
- Inequitable opportunities

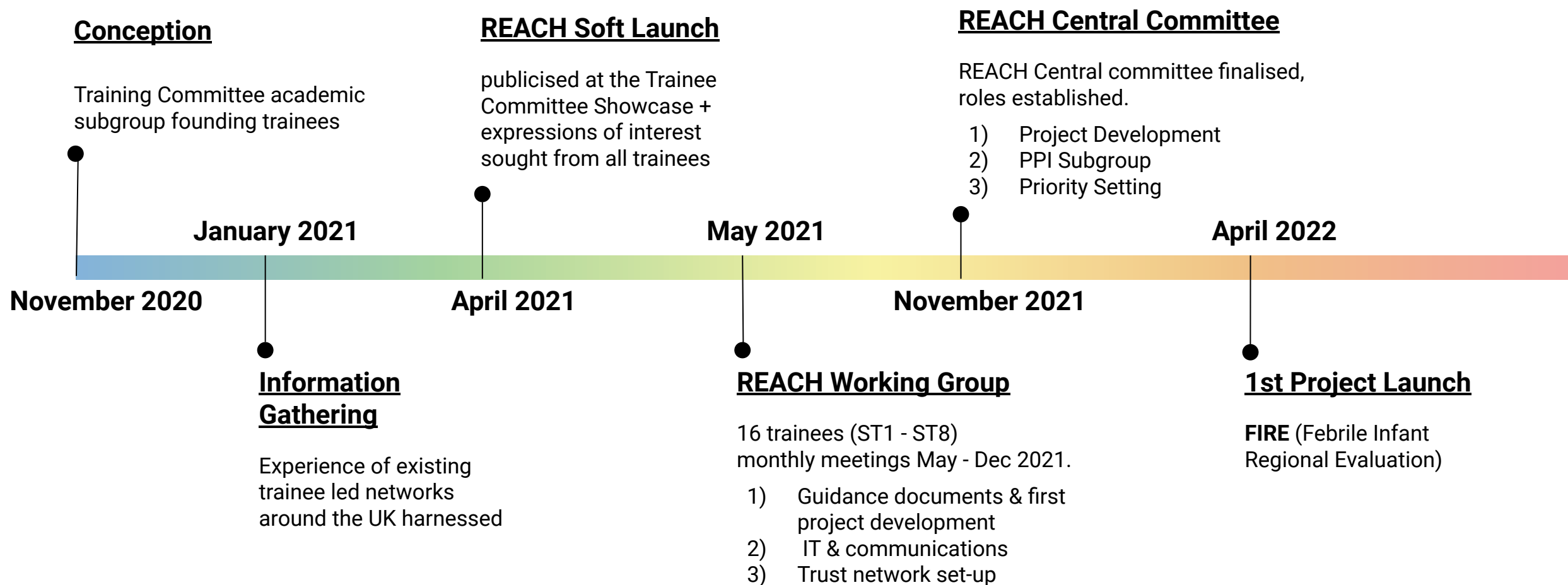


# Mission statement



REACH is a pan-London, junior-led network that exists to support the conception and coordination of multi-centre research, audit and service evaluation projects to answer relevant clinical paediatric questions.

# Setting up REACH



# RCPCH TRN group



Launched 2021

Peer support, guidance

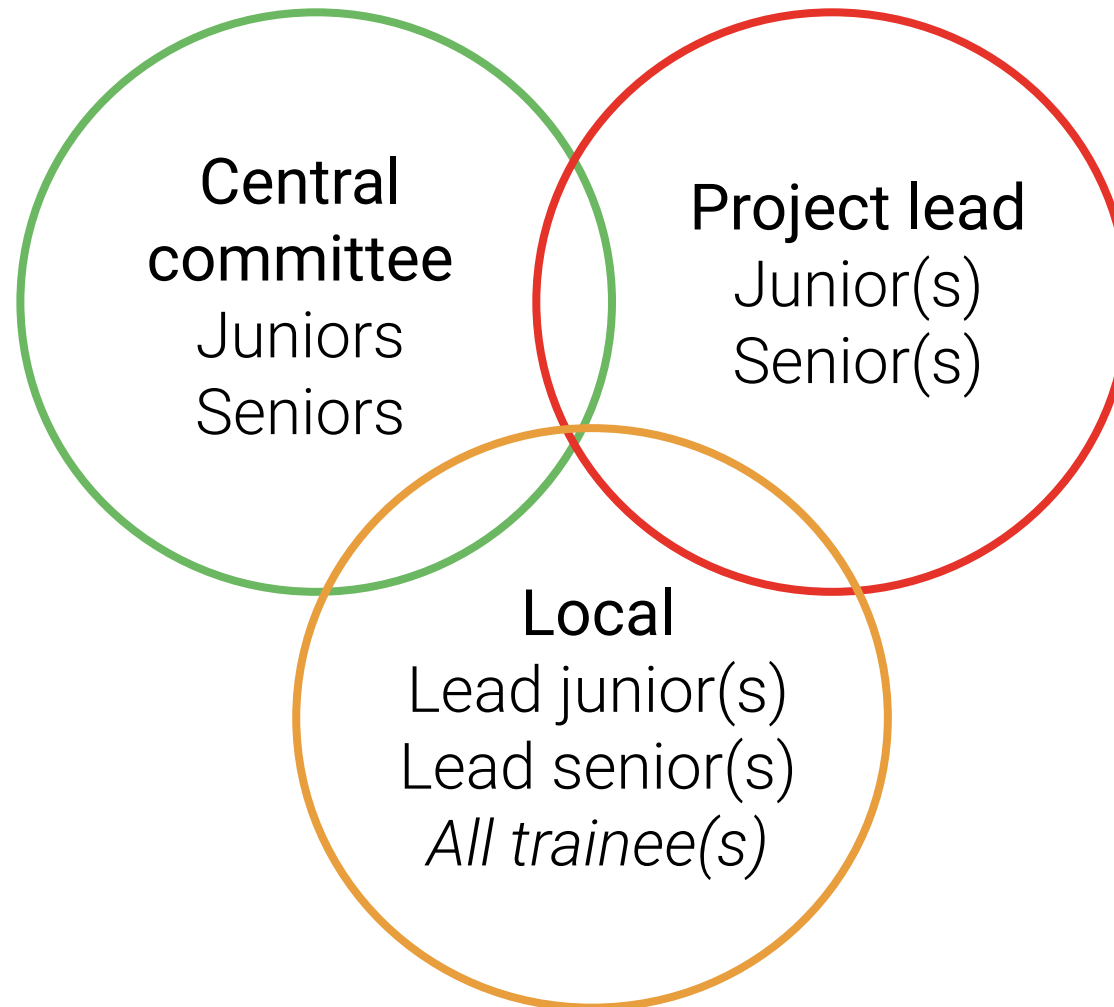
Now 12 regional paediatric TRNs

Education and training

Soon: pan-UK project

- [Cheshire and Merseyside Paediatric Trainee Research Network \(ChaMP\)](#)
- [Child Health East of England Research Initiative \(CHEERI\)](#)
- [Children's Research Trainee Network \(CREST\)](#)
- [Neonatal Trainee-led Research and Improvement Projects \(NeoTRIPs\)](#)
- [Northern Ireland Paediatric Education Audit and Research Network \(NI PEAR\)](#)
- [Paediatric Research Across the Midlands \(PRAM\)](#)
- [Paediatric Research in Manchester England \(PRIME\)](#)
- [Peninsula Trainees Research, Audit & Innovation Network \(PenTRAIN\)](#)
- [Research, Evaluation & Audit for Child Health \(REACH Network London\)](#)
- [Scottish Paediatric Researchers in Training \(SPRINT\)](#)
- [Severn Paediatric Audit Research and Quality Improvement \(SPARQ\)](#)
- [Welsh Research and Education Network \(WREN\)](#)

# REACH structure



# Central Committee



## Oversee all REACH activity

- Champions junior-led research across London
- Supports all stages of REACH projects

## Regional Coordinators

- Recruit & communicate with contacts in each hospital
- Disseminates vital information for regional projects
- Support, troubleshoot and act as 1st point of contact

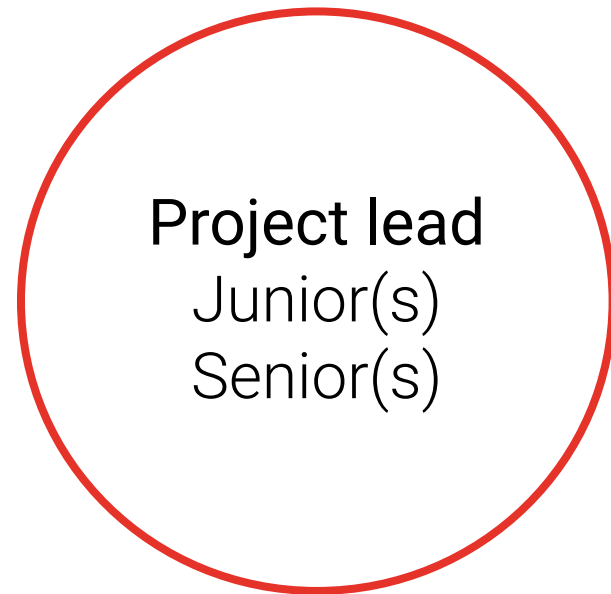
## IT & Communication

- Website/IT/email
- Social media, newsletter, mailing list

## Webinars

## PPI

# Project Teams



## Lead Junior

- Devise study proposal and study protocols
- Consider patient and public engagement
- As necessary consider R&D advice, REC advice
- Design data collection tools
- Centralised anonymised data collection
- Lead on data analysis
- Presenting at regional /national level
- Leading submission for publication

## Lead Senior

- Special interest in project area
- Advises on conduct of the study
- Supportive

# Local Teams



## Local Lead Junior

Contact point – w central committee & project specific leads  
Leads locally on projects, coordinating data collectors  
Liaising w local R&D + Clinical Governance department  
Local dissemination of protocol & data collection tool, data entry oversight  
Present data at local level

## Local Senior

Continuity, troubleshooting, general support

## All

Feedback on piloting  
Data collection

# How does it work?



## Project Development

- Trainees inspired by project idea
- Trainee completes project proposal form
- Project accepted, trainee becomes Project Lead
- Central committee supports creation of protocol and data collection tools
- Patient & public involvement supported

## Project Implementation

- Distribution to network of established links in each hospital
- Local leads register project with local clinical governance +/- R&D departments
- All local leads collect data
- Anonymized data sent to project leads for analysis

## Project Analysis

- Central committee support analysis
- Local leads present results at locally & compare to pan-region results
- Project leads coordinate write up, publication & present at regional/national conference
- All contributors acknowledged in any publications & presentations

Project supported by the Central Committee at all times

# PEAR survey



## **Paediatric trainee experience of multi-site audit and research (PEAR), a cross sectional London REACH network study**



Dore R<sup>1</sup>, D'Souza M<sup>1</sup>, Ghosh N<sup>1</sup>, Carr D<sup>1</sup> & Loucaides E<sup>1</sup>

# PEAR survey



Category	Sub-category	No.	Percent
IAT	Yes	20	14.10%
	No	122	85.90%
Gender	Male	39	27.70%
	Female	102	72.30%
PMQ	IMG	17	12.00%
	UK	125	88.00%
Ethnicity	White	87	62.60%
	Asian	29	20.90%
	Black	5	3.60%
	Mixed	13	9.40%
	Other	5	3.60%
Training %	F	82	57.70%
	LTFT	60	42.30%

Subspecialty trainee	Yes	29	20.60%
	App.	47	33.30%
	No	65	46.10%
Grade	ST1-3	59	41.50%
	ST4-5	46	32.40%
	ST6-8	37	26.10%
Age (years)	25-34	106	75.20%
	35-44	34	24.10%
	45-54	1	0.70%
Location (in London)	North West	21	14.80%
	South	60	42.30%
	North East & Central	60	42.30%
	Pan-London	1	0.70%

142  
London  
Trainees

# PEAR survey



	IAT		Gender		PMQ		Ethnicity					Training %		Subspecialty Trainee			Total
	Yes	No	Male	Female	IMG	UK	White	Asian	Black	Mixed	Other	LTFT	FT	Yes	App.	No	
No. additional qualifications																	
0	0.0%	36.1%	20.5%	34.3%	52.9%	28.0%	29.9%	31.0%	60.0%	15.4%	40.0%	28.3%	32.9%	17.2%	31.9%	36.9%	31.0%
1-2	75.0%	61.5%	76.9%	58.8%	47.1%	65.6%	63.2%	62.1%	40.0%	84.6%	60.0%	60.0%	65.9%	72.4%	59.6%	61.5%	63.4%
3-4	25.0%	2.5%	2.6%	6.9%	0.0%	6.4%	6.9%	6.9%	0.0%	0.0%	0.0%	11.7%	1.2%	10.3%	8.5%	1.5%	5.6%
Poster presentations (no. activities)																	
0	0.0%	13.1%	7.7%	12.7%	23.5%	9.6%	9.2%	13.8%	40.0%	0.0%	20.0%	6.7%	14.6%	0.0%	8.5%	18.5%	11.3%
1-3	60.0%	69.7%	74.4%	65.7%	58.8%	69.6%	69.0%	69.0%	60.0%	76.9%	40.0%	68.3%	68.3%	69.0%	66.0%	69.2%	68.3%
4-6	40.0%	17.2%	17.9%	21.6%	17.6%	20.8%	21.8%	17.2%	0.0%	23.1%	40.0%	25.0%	17.1%	31.0%	25.5%	12.3%	20.4%
Oral presentations (no. activities)																	
0	0.0%	54.1%	38.5%	49.0%	47.1%	46.4%	40.2%	55.2%	60.0%	61.5%	40.0%	41.7%	50.0%	31.0%	36.2%	61.5%	46.5%
1-2	80.0%	39.3%	59.0%	40.2%	47.1%	44.8%	48.3%	37.9%	40.0%	38.5%	60.0%	41.7%	47.6%	51.7%	53.2%	35.4%	45.1%
3	20.0%	6.6%	2.6%	10.8%	5.9%	8.8%	11.5%	6.9%	0.0%	0.0%	0.0%	16.7%	2.4%	17.2%	10.6%	3.1%	8.5%
Publications (no. types)																	
0	10.0%	39.3%	28.2%	32.4%	29.4%	36.0%	32.2%	31.0%	80.0%	53.8%	0.0%	25.0%	42.7%	20.7%	31.9%	44.6%	35.2%
1-2	50.0%	50.8%	53.8%	54.9%	64.7%	48.8%	48.3%	65.5%	20.0%	46.2%	80.0%	55.0%	47.6%	48.3%	55.3%	49.2%	50.7%
3-4	35.0%	7.4%	15.4%	9.8%	0.0%	12.8%	16.1%	0.0%	0.0%	0.0%	20.0%	16.7%	7.3%	24.1%	10.6%	6.2%	11.3%
5	5.0%	2.5%	2.6%	2.9%	5.9%	2.4%	3.4%	3.4%	0.0%	0.0%	0.0%	3.3%	2.4%	6.9%	2.1%	0.0%	2.8%
No. respondents	20	122	39	102	17	125	87	29	5	13	5	60	82	29	47	65	142

# PEAR survey



IAT			Gender		PMQ		Ethnicity					Training %		Subspecialty Trainee			Total
	Yes	No	Male	Female	IMG	UK	White	Asian	Black	Mixed	Other	LTFT	FT	Yes	App.	No	
“I can identify research opportunities”																	
Agree	80.0%	37.7%	53.8%	40.2%	47.1%	43.2%	43.7%	55.2%	20.0%	30.8%	40.0%	31.7%	52.4%	37.9%	53.2%	40.0%	43.7%
Neutral	10.0%	22.1%	17.9%	20.6%	23.5%	20.0%	21.8%	13.8%	20.0%	15.4%	40.0%	25.0%	17.1%	24.1%	17.0%	21.5%	20.4%
Disagree	10.0%	40.2%	28.2%	39.2%	29.4%	36.8%	34.5%	31.0%	60.0%	53.8%	20.0%	43.3%	30.5%	37.9%	29.8%	38.5%	35.9%
“I can identify supervisors”*																	
Agree	50.0%	41.3%	51.3%	43.6%	35.3%	46.8%	47.7%	48.3%	20.0%	38.5%	40.0%	39.0%	50.0%	34.5%	55.3%	43.8%	45.4%
Neutral	10.0%	21.5%	12.8%	21.8%	29.4%	18.5%	20.9%	17.2%	20.0%	7.7%	40.0%	22.0%	18.3%	27.6%	23.4%	20.3%	19.9%
Disagree	40.0%	37.2%	35.9%	34.7%	35.3%	34.7%	31.4%	34.5%	60.0%	53.8%	20.0%	39.0%	31.7%	37.9%	21.3%	35.9%	34.8%
“I want access to research”																	
Agree	90.0%	88.5%	87.2%	89.2%	76.5%	90.4%	90.8%	82.8%	100.0%	84.6%	100.0%	86.7%	90.2%	82.8%	93.6%	89.2%	88.7%
Neutral	10.0%	8.2%	10.3%	7.8%	5.9%	8.8%	8.0%	10.3%	0.0%	7.7%	0.0%	11.7%	6.1%	13.8%	2.1%	10.8%	8.5%
Disagree	0.0%	3.3%	2.6%	2.9%	17.6%	0.8%	1.1%	6.9%	0.0%	7.7%	0.0%	1.7%	3.7%	3.4%	4.3%	0.0%	2.8%
No respondents.	20	122	39	102	17	125	87	29	5	13	5	60	82	29	47	65	142

# PEAR survey



	IAT		Gender		PMQ		Ethnicity					Training %		Subspecialty Trainee			Total
	Yes	No	Male	Female	IMG	UK	White	Asian	Black	Mixed	Other	LTFT	FT	Yes	App.	No	
Good Clinical Practice course																	
Yes	65.0%	48.4%	56.4%	48.0%	58.8%	49.6%	51.7%	44.8%	20.0%	53.8%	60.0%	50.0%	51.2%	58.6%	61.7%	38.5%	50.7%
No	35.0%	51.6%	43.6%	52.0%	41.2%	50.4%	48.3%	55.2%	80.0%	46.2%	40.0%	50.0%	48.8%	41.4%	38.3%	61.5%	49.3%
No. research activities																	
0	0.0%	17.2%	5.1%	18.6%	23.5%	13.6%	10.3%	10.3%	60.0%	30.8%	20.0%	15.0%	14.6%	10.3%	14.9%	16.9%	14.8%
1-3	5.0%	44.3%	46.2%	35.3%	41.2%	38.4%	37.9%	44.8%	20.0%	38.5%	40.0%	40.0%	37.8%	34.5%	36.2%	43.1%	38.7%
4-6	55.0%	28.7%	30.8%	33.3%	23.5%	33.6%	34.5%	31.0%	20.0%	23.1%	40.0%	30.0%	34.1%	34.5%	34.0%	30.8%	32.4%
7-8	40.0%	9.8%	17.9%	12.7%	11.8%	14.4%	17.2%	13.8%	0.0%	7.7%	0.0%	15.0%	13.4%	20.7%	14.9%	9.2%	14.1%
Research % in paid hours*																	
0	20.0%	48.3%	34.2%	48.5%	43.8%	44.2%	42.5%	39.3%	40.0%	63.6%	50.0%	39.7%	47.4%	32.1%	33.3%	58.1%	44.1%
10-30	45.0%	40.5%	44.7%	39.2%	43.8%	40.8%	43.7%	39.3%	60.0%	27.3%	50.0%	50.0%	34.6%	57.1%	51.1%	27.4%	41.2%
40-60	30.0%	6.9%	15.8%	8.2%	6.3%	10.8%	10.3%	14.3%	0.0%	0.0%	0.0%	6.9%	12.8%	7.1%	11.1%	9.7%	10.3%
70-90	5.0%	0.9%	0.0%	2.1%	0.0%	1.7%	1.1%	3.6%	0.0%	0.0%	0.0%	0.0%	2.6%	0.0%	2.2%	1.6%	1.5%
100	0.0%	3.4%	5.3%	2.1%	6.3%	2.5%	2.3%	3.6%	0.0%	9.1%	0.0%	3.4%	2.6%	3.6%	2.2%	3.2%	2.9%
"I have capacity for research"																	
Agree	35.0%	21.3%	25.6%	22.5%	29.4%	22.4%	26.4%	17.2%	20.0%	15.4%	40.0%	21.7%	24.4%	24.1%	25.5%	21.5%	23.2%
Neutral	25.0%	13.9%	15.4%	15.7%	11.8%	16.0%	11.5%	27.6%	20.0%	23.1%	0.0%	10.0%	19.5%	10.3%	21.3%	13.8%	15.5%
Disagree	40.0%	64.8%	59.0%	61.8%	58.8%	61.6%	62.1%	55.2%	60.0%	61.5%	60.0%	68.3%	56.1%	65.5%	53.2%	64.6%	61.3%
No. respondents	20	122	39	102	17	125	87	29	5	13	5	60	82	29	47	65	142

We asked 142 paediatric trainees about their experiences of research...

14% were Integrated Academic Trainees (IATs)

86% were not on an academic training pathway (non-IATs)

IATs...

Participated in twice as many research activities as other trainees

Were twice as likely to be able to identify research opportunities



1 in 5 non-IAT trainees had never participated in research



Women trainees

International graduates



were **less likely** to be involved in research



84% of the average trainee's research activities took place outside of their paid work hours

# PEAR

Paediatric Trainee Experience of  
Multi-site Audit and Research



Dr Rhys Dore - Dr Michelle D'Souza -  
Dr Neelakshi Ghosh - Dr Dominic Carr  
- Dr Eva Loucaides

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89% of trainees want more access to research activities  
to...

improve  
patient care

develop  
research skills

support career  
development

They're  
held back  
by:

Difficulty  
accessing  
opportunities &  
projects

Competing  
demands in &  
out of work

Lack of  
allocated  
time

Shortage of  
supportive  
supervisors



More  
opportunities for  
non-academic  
trainees

Protected  
time in the  
rota

Support from  
supervisors and  
academics

Better  
publicised  
opportunities  
for QI and  
research



They'd  
like to  
have:

# RCPCH Trainees participation in child health research survey Report

August 2023



# FIRE study



## Retrospective observational study

Infants  $\leq$  **90 days of age** presenting with **fever**,  
19 London hospitals,  
1<sup>st</sup> April 2021 – 31<sup>st</sup> March 2022

Data from **2041 presentations** collected

RCPCH conference 2024 oral presentation

## Prospective observational study

### **Primary Objective**

1. Is jaundice detected later in babies who have darker skin tone?
2. Do transcutaneous bilirubin measurements correlate well with serum bilirubin measurements in babies of all skin tones?

### **Secondary Objective**

To describe the variation in practice in assessment of jaundice in neonates in different sites across the London regio

### Survey

Comparing clinical practice guidelines and care pathways pan-London

# PEAR-DROPS

Directly Rostered Opportunities for Protected SPA



## Survey - PEAR follow-up

Aim:

quantify **rostered SPA time** provided to paediatric trainees in London by analysing work schedules and comparing them with RCPCH charter recommendations.

## QIP

Collect and compare London CPG re Paediatric Oral Fluid Challenges

Systematic Review – what is current best practice?

Propose pan London guideline

# Other REACH Activities



**Webinars** (speakers wanted!)

**Systematic Review Hub + Package** (coming soon)

**Dissemination of Opportunities** (mailing list, social media, website)



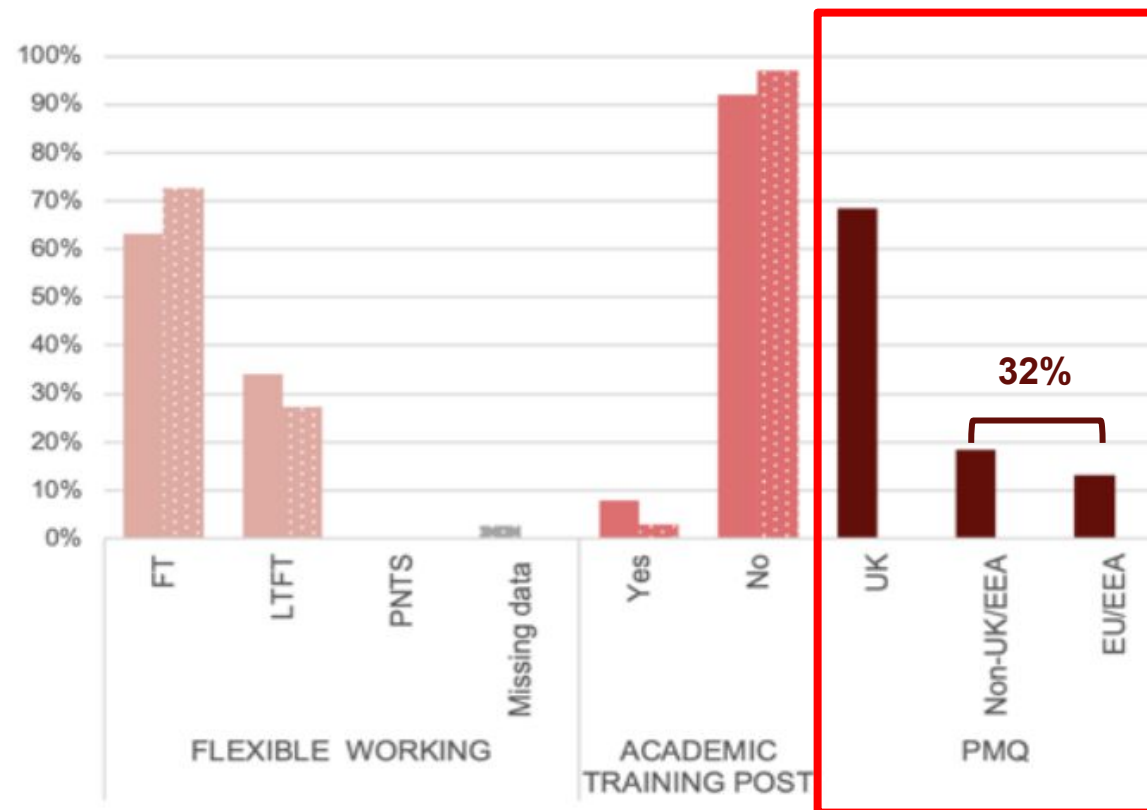
## REACH Equality, Diversity and Inclusion Report 2024

The London REACH (Research, Evaluation and Audit in Child Health) network has been set up as a junior-led research, audit, and service evaluation collaboration across London. We aim to facilitate research opportunities for trainees and clinical fellows working across the London region and to provide training in research through participation in multi-site projects.

The paediatric workforce is diverse and so are the children and young people we look after. By being representative of this diversity, we believe we are better able to address inequalities in child health. We are part of a much wider network of professional bodies who have a responsibility to tackle inequality in all its forms.

vs  
IMGs in paediatric  
training London **15%**  
(nationally 25%)

## REACH Local Teams



# REACH Challenges



**Financing**

**Time**

**Autonomy vs expertise**

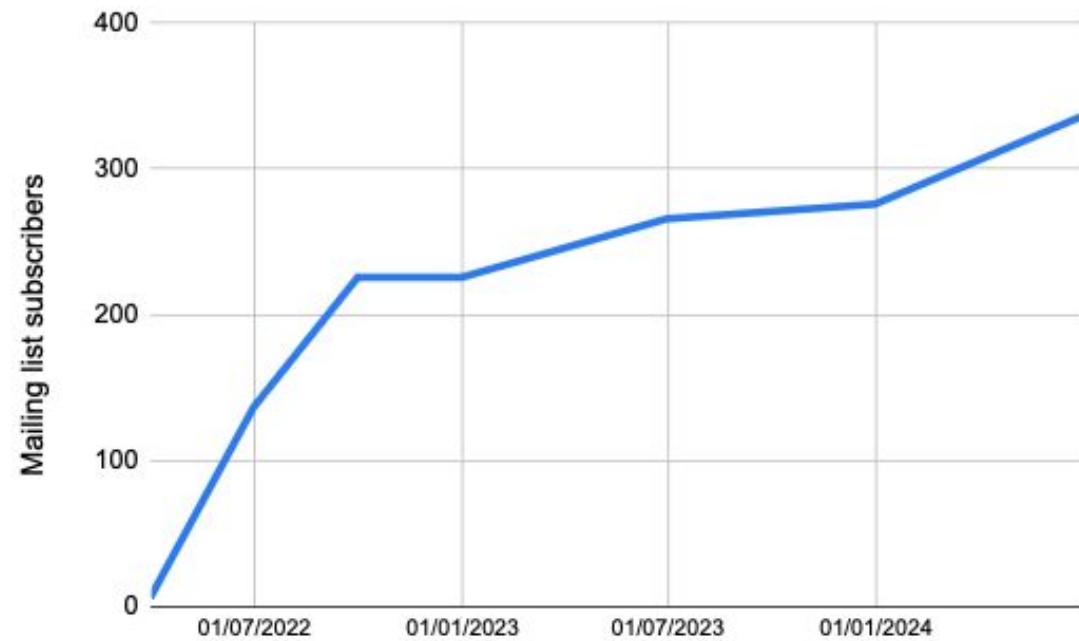
**Analysis & Statistics**

**PPI**

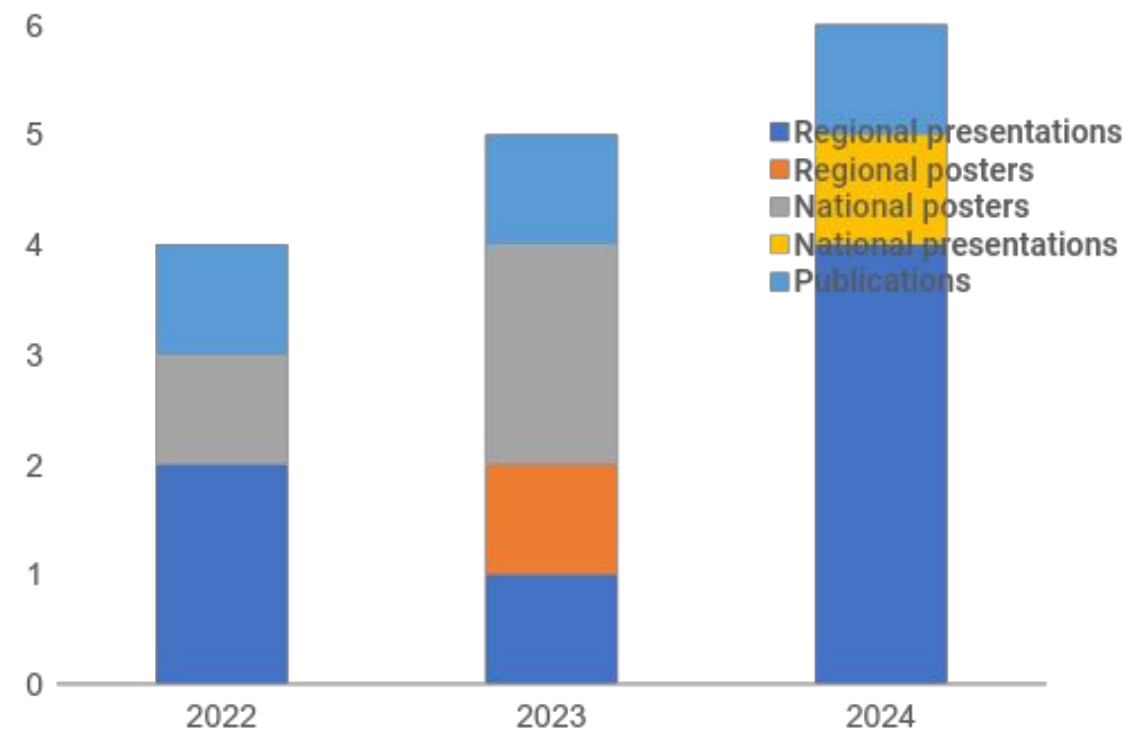
# REACH outputs



Ever involved in REACH (since April 2022)		
	Non-Consultant	Consultant
Central Committee	22	4
Project Lead	13	3
Local Lead	105	35
	<b>140</b>	<b>42</b>
	<b>182</b>	



# REACH outputs

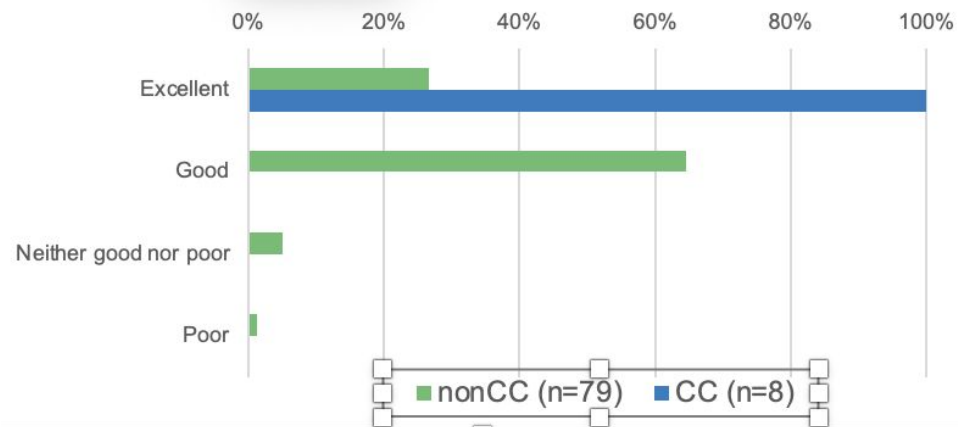


# REACH outputs

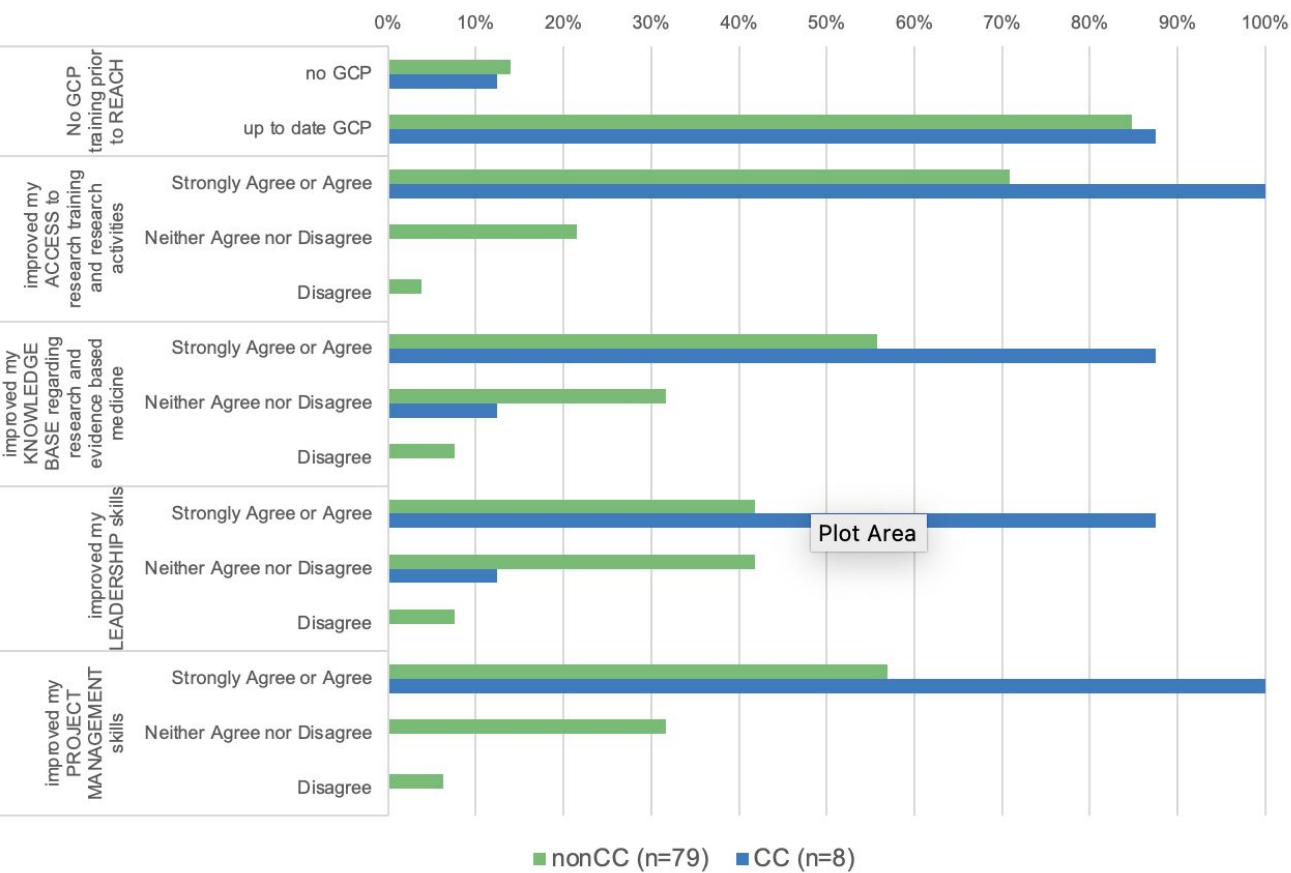


Rate overall experience being part of REACH

Chart Area



REACH & skills/knowledge



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 @REACHnetworkLDN 



**Want to stay up to date with REACH and our new project?**  
Sign-up to our newsletter using the QR code or the link below:

<http://eepurl.com/hTGgMP>

