

## **Directly Rostered Opportunities for Protected SPA:**

A REACH Network Paediatric trainee Experience in multi-site Audit and Research Follow-On Study (PEAR DROPS)

## **RESEARCH PROTOCOL**

### **BACKGROUND AND RATIONALE**

Supporting professional activity (SPA) time is a key aspect of training for paediatric doctors. The RCPCH Trainee Charter<sup>1</sup>, published in March 2019 and updated in September 2022, states that “trainees expect to have adequate time within their work schedule to complete Supporting Professional Activity, for example QI (quality improvement), audit, leadership, ePortfolio.” It goes further, stating that if these vital activities must be completed outside of rostered hours, trainees should be encouraged to Exception Report, to ensure fair remuneration and time off for this mandated work. The RCPCH Charter recommends that a minimum of 8 hours a month for ST1-3 trainees and 16 hours a month for ST4+ trainees is provided, in addition to any departmental teaching and clinical admin time. This equates to roughly 2 and 4 hours per week, respectively.

SPA time is vital to ensure the RCPCH Progress Plus<sup>2</sup> curriculum domains are met. The most pertinent curriculum domains are:

**Learning Outcome 8**, relating to identifying opportunities for quality improvement, undertaking service evaluation projects and audits, and participating in local clinical governance;

**Learning Outcome 11**, relating to participation in research-based activity and conducting literature reviews;

**Learning Outcome 6**, relating to development of personal leadership skills.

In addition, every trainee is required to maintain an up-to-date ePortfolio and regularly complete mandatory assessments, including case based discussions (CBD) and safeguarding CBDs, Acute Care Assessment Tools (ACAT), Directly Observed Procedural skills (DOPS), Mini Clinical Evaluation Exercise (mini-CEX), gathering Multi-Source Feedback (MSF), Discussion of Correspondence (DOC), Handover Assessment Tools (HAT), LEADER assessments, and Entrustment with Care Assessment Tool (ECAT).



The London REACH (Research, Evaluation and Audit in Child Health) Network<sup>3</sup> was established in 2021 by paediatric trainees to provide support and opportunities for collaborative engagement in research and QI.

The recent PEAR (Paediatric Trainee Experience of Multi-site Audit and Research) study performed by the REACH Network identified that out of 142 trainees, 89% wanted more access to research during training. Despite this, a lack of time within their work schedule was identified as a key barrier to achieving this goal, with only 23% reportedly having capacity for research and only 16% of research activity being undertaken during paid time<sup>4,5</sup>.

As it is a mandatory requirement for trainees to undertake the activities included under the SPA umbrella, we hypothesise that trainees lacking in rostered SPA time are completing these in their own, unpaid time, which may restrict the educational experience, quality of projects and engagement in these important pursuits.

We aim to quantify the provision of rostered SPA time provided to paediatric trainees in London through analysis of current work schedules provided to trainees. Work schedules are contractually required documents under the Terms and Conditions of Service for NHS Doctors and Dentists in Training (England) 2016<sup>6</sup>. They set out the intended learning outcomes (mapped to the educational curriculum), the scheduled duties of the doctor, time for quality improvement, research and patient safety activities, periods of formal study (other than study leave), and the number and distribution of hours for which the doctor is contracted.

By analysing these documents, we can identify how much time is allocated to doctors for SPAs and compare it with the recommendations stipulated in the RCPCH charter. In this way, we can further clarify the impact of this barrier to obtaining the required experience in research and other vital RCPCH Curriculum domains.

By looking at average rostered hours for each work schedule, we can also further examine whether there is capacity within each department for doctors to obtain the required SPA time within paid hours.

## **OBJECTIVES**

To gather cross-sectional data on working patterns for London School of Paediatrics (LSP) trainees, to determine:

Primary Aim:

1. The quantity of directly rostered and protected time for SPAs, in relation to the recommendations in the RCPCH Trainee Charter

Secondary Aims:

2. The subjective experience of SPA provision to trainees,
3. The capacity of a rota to accommodate more paid SPA time.

## **METHODOLOGY**

### **Participants:**

The REACH Network Local Leads will be responsible for identifying each type of rota worked by paediatric trainees within their hospital, eg “ Neonatal SpR”, “Paediatric Surgery SHO”.

For each rota worked, Local Leads will identify a trainee to submit the Generic Work Schedule associated with it, and complete a short survey (Appendix 1). The survey will be based on the doctor’s subjective experience of how SPA provision is arranged for that rotation, and will be encouraged to garner the opinions of their colleagues when submitting their responses.

### **Data Collection & Storage:**

Data collection will be via a survey, using Qualtrics<sup>7</sup>. Work schedules and survey data will be collected and stored by the Reach Central Committee Google Drive.

## Data analysis

Primary analysis will be of contractually provided work schedules. By assessing the length and number of directly rostered SPA shifts, an average hours per month can be obtained and compared to the RCPCH Charter recommended allowance.

Analysis of trainee provided survey answers will provide a subjective estimation of SPA time which is not directly rostered on the work schedule. While SPA time should be provided in a rostered and protected fashion, we acknowledge that it may be taken in an ad-hoc fashion. By identifying shifts which have the possibility to undertake SPA, how often there is capacity on these shifts and how much subjective SPA time doctors have, we can identify an estimate of non-directly rostered SPA time.

## Reporting and communication of results

**Study results** will be disseminated in a report on the REACH website ([www.reachnetworkldn.com](http://www.reachnetworkldn.com)) and/or in regional/national presentations at meetings or conferences and/or in articles in peer-reviewed journals. We will share study results once they are published with all study participants, the wider LSP community and on social media. For any publications or output from this work, Local REACH leads will be named authors under the REACH collective group authorship, and all doctors who submit a survey result will receive recognition.

## References:

1. <https://www.rcpch.ac.uk/resources/trainee-charter>
2. <https://www.rcpch.ac.uk/education-careers/training-assessment/progressplus>
3. <https://www.reachnetworkldn.com>
4. Lawson, G., Carr, D., & Loucaides, E. (2023). Paediatric Trainee Experience of Multi-site Audit and Research (PEAR), a cross sectional REACH Network study. *London Paediatrics*
5. Dore R, D'Souza M, Ghosh N, et al 317 Paediatric trainee Experience of multi-site Audit and Research (PEAR), a cross sectional London REACH network study *Archives of Disease in Childhood* 2023;108:A443.
6. <https://www.nhsemployers.org/system/files/2023-02/NHS-Doctors-and-Dentists-in-Training-England-TCS-2016-VERSION-11.pdf>
7. [www.qualtrics.com](http://www.qualtrics.com)

## APPENDIX: PEAR DROPS Survey Questions

Please upload a copy of the work schedule

This should be a generic work schedule in pdf or .docx format.

Please do not upload the actual rota spreadsheet or a work schedule tailored to a particular individual. Please omit the trainee's name before uploading.

1a. Which hospital is this Work Schedule from?

1b. Please detail the speciality covered by this Work Schedule

1c. Please detail all paediatric training grades covered by this Work Schedule

2a. Does this Work Schedule contain shifts which are exclusively used for protected SPA time?  
(As opposed to occasionally used, which we will ask about later)

2b. Name each shift type which is used exclusively for protected SPA time

2c. How often are you required to cover clinical duties on **SHIFT TYPE** shifts, instead of SPA time?

2d. If you are required to cover clinical duties on **SHIFT TYPE** shifts, is SPA time re-allocated elsewhere?

3a. Does this Work Schedule contain shifts which are occasionally intended to be used for SPA time?

3b. Name each shift type which is occasionally intended fo be used for SPA time

3c. How often can this **SHIFT TYPE** shifts be used for SPA time?

3d. When **SHIFT TYPE** shifts are used for SPA time, how much of the shift can be used?

4. Is there any other facilitated time within this rota to undertake SPA work?

*E.g. Other paid time within the rota which is not captured in the work schedule?*

5. Please briefly outline how opinions were gathered for this survey?

*E.g. Own opinion, informal discussion with colleagues, Whatsapp group messages, emails, junior-junior meetings etc*

6a. Please enter your details

*This is entirely optional, and will only be used to acknowledge your contribution*

6b. CLICK to be added to the REACH mailing list