

# CIP GUIDE

## Statement of Expectations and Guidance for CiP 5

### CiP 5: The doctor is able to engage with research to promote innovation.

#### 1 What is this CiP about?

This CiP is designed to ensure that trainees in CSRH acquire the skills, knowledge and attributes needed to implement evidence-based medicine into their clinical practice and support research and innovation within healthcare. It is expected that a consultant in CSRH will be able to effectively interpret new and emerging research and understand its relevance or otherwise, to their day-to-day clinical care.

During training, doctors should be exposed to and participate in a wide variety of research activity as well as attending educational events to support their learning in this area. The ability to reflect on and learn when projects have gone well or when they have not, are all skills that should be developed and consolidated as training progresses. Here are the GMC approved skills and descriptors.

Key Skills	Descriptors
Demonstrates research skills	<ul style="list-style-type: none"> <li>• Understands principles of healthcare research and different methodologies.</li> <li>• Understands the principles of ethics and governance within research, follows guidelines on ethical conduct and valid consent for research.</li> <li>• Understands the use of informatics, statistical analysis and emerging research areas.</li> <li>• Performs literature searches, interrogates evidence and communicates this to colleagues and patients.</li> <li>• Has the ability to translate research into practice.</li> </ul>
Demonstrates critical thinking	<ul style="list-style-type: none"> <li>• Critically evaluates arguments and evidence.</li> <li>• Can interpret and communicate research evidence in a meaningful, unbiased way to support informed decision making.</li> </ul>
Innovates	<ul style="list-style-type: none"> <li>• Is open to innovative ideas and the views of service users.</li> <li>• Shows initiative by identifying problems and creating solutions.</li> <li>• Supports change by working to achieve consensus.</li> <li>• Understands the value of learning from failure in innovation.</li> </ul>

These **Key Skills** also map to a variety of generic professional capabilities developed by the GMC. Evidence supporting progress in this CiP should link to generic capabilities such as dealing with complexity, teamwork and leadership and knowledge of patient safety issues.

To help trainees and trainers assess progress in this CiP, there is a Statement of Expectations for trainees at each stage of training. It offers guidance as to what constitutes acceptable progress in each training year.

**Descriptors** are assigned to each Key Skill. It is important to note that they are given as guidance as to the kinds of activity that will help a trainee self-assess as to their progress with the acquisition of the Key Skill. Other activities that could be said to belong to that Key Skill are not excluded, hence the list is not exhaustive.

<b>Statement of expectations: CiP 5</b>	
<p><b>ST1–3</b> <b>Meeting expectation</b></p>	<p>A trainee who is meeting expectations will show evidence of being able to evaluate research and take part in critical discussions. They may need assistance in interpretation of statistical results. They will understand the principles of healthcare research and the different methodologies in use. They will understand some of the principles of ethics and governance within research and have an understanding of informed choice and valid consent with support. They will refer to local and national guidance on most occasions. They may assist with innovation within their department. The trainee will recognise the importance of an evidence-based approach to patient care.</p>
<p><b>ST4–5</b> <b>Meeting expectation</b></p>	<p>A trainee who is meeting expectations will continue to make progress in the areas covered in their earlier training programme. They will use an evidence-based approach to clinical care in most situations. They will be able to communicate research results to service users in an unbiased manner, with support and encouragement and help them to make valid consent decisions on some occasions but may need support to do so. They will take a role in the development of local guidance, problem-solving and innovation when prompted, and may be able to support others to do the same on some occasions. They can communicate results and critically appraise their own work with support. They understand and use SMART objectives to set personal development goals with guidance. The trainee will be able to</p>

	provide evidence that they are continuing to improve in the areas covered in their earlier training and making reasonable progress in acquiring additional key skills.
<b>ST6</b> <b>Meeting expectation</b>	<p>In addition to the earlier levels outlined, a trainee who is meeting expectations will be able to recruit participants to multicentre trials and can provide balanced, unbiased information to enable valid consent. They understand and can apply the principles of Good Clinical Practice. They are able to support colleagues in innovation, communication and evaluation of results on most occasions. They can communicate results through effective oral presentation and high-quality written communication. They may have peer-reviewed publication(s) but this is not a requirement in order to meet expectations. They can demonstrate involvement of the wider multidisciplinary team, as well as patient views, to develop and evaluate innovation. They can make appropriate adjustments in their approach to implementation if the evidence suggests that this is necessary. The trainee will be on track to meet all the key skills in this CiP by the end of training.</p>

## 2 What kind of evidence might be relevant to this CiP?

This list is not exhaustive. Trainees and supervisors can discuss and agree other sources of relevant evidence. They should also refer to the [Matrix of Progression](#) which sets out the key overall requirements for progression at each stage of training.

- Part 1 and 2 MFSRH
- TO2
- GPC Certificate
- Research Methods course
- Literature Search course
- Attendance/Observation at a Research Ethics Committee
- Participation in a clinical trial, recruiting participants in the course of clinical work
- Acting as Principal Investigator for a trial
- Acting as a peer reviewer
- Pilot trials
- Scientific paper presentations oral, poster.
- Membership of or contribution to a Guideline Group – local or national (CEU)
- Reflections

- Journal Club
- Public Health project
- Scientific journal publication

### 3 What are the Knowledge Requirements for this CiP?

The [Knowledge Requirements](#) for all CiPs are contained in a single document, available on the FSRH website. They are not listed here because they also constitute the MFSRH syllabus which needs to be a separate document for all examination candidates, some of whom are not CSRH trainees.

### 4 When can this CIP be signed off?

A trainee can make a self-assessment of their progress in this CiP at any point in the training year. The first question for a trainee to ask themselves is,

- Do I think I meet the expectations for this year of training?

If the answer is yes, then the next questions to ask are:

- Have I produced evidence and linked that evidence to support my self-assessment?
- Is this evidence at the right level of complexity for my year of training?
- Do I understand the knowledge requirements of this CiP? If not, do I need to look at the knowledge requirements/MFSRH syllabus?

Once the trainee has completed the self-assessment the educational supervisor (ES) needs to review the evidence and ask the same questions:

- Is this sufficient evidence to sign off the CiP?
- Am I happy there is evidence to support the acquisition of key skills?
- Is this the best evidence? Would some of this evidence be more appropriate in other CiPs as evidence?
- Is there other evidence that has been missed?
- Is the level right for this trainee? Are they meeting the standards in the statement of expectations?

When the ES judges that the trainee has met the expectations for that year, they can sign off the CiP. Most crucially, this is a global judgement which does not have to be linked to key skills. One piece of well-presented evidence with some reflection may be enough to sign off the CiP. It is the **quality** of the evidence, not the quantity, which is key. Remember also that one piece of evidence can be used up to three times across the CiPs.

### 5 Are there any examples or case studies?

#### Example 1 – ST2 trainee (ES focus)

You are an ES having a meeting with an ST2 trainee, who asks for sign-off of CiP 5 after considering the questions regarding the evidence. They feel that they meet the statement of expectations. They have submitted the following evidence linked to the CiP from the evidence boxes:

- PowerPoint presentation from journal club demonstrating critical thinking
- GCP certificate obtained
- Signed off as a recruiter within clinic for a national trial
- Completion of eLearning on trial methodology

As an ES you have reviewed the trainee's TO2 which includes a comment highlighting the trainee's useful suggestion for improvement in the user pathway through clinic which is currently being implemented.

The statement of expectations for an ST2 trainee who is meeting expectations in CiP 5 is as follows:

- A trainee who is meeting expectations will show evidence of being able to evaluate research and take part in critical discussions
- They may need some assistance in the interpretation of statistical results
- They will understand the principles of healthcare research and the different methodologies in use
- They will understand some of the principles of ethics and governance within research and have an understanding of informed choice and valid consent with support
- They will refer to local and national guidance on most occasions. They may assist with innovation within their department
- The trainee will recognise the importance of an evidence-based approach to patient care.

Therefore, based on your meetings with the trainee and the evidence which is linked to the CiP, you can feel confident in signing off this CiP for ST2.

### **Example 2 – ST6 trainee (trainee focus)**

You are an ST5 trainee considering sign-off for CiP 5. You are 7 months into ST6 and have submitted the following evidence linked to the CiP:

- eLearning on research
- GCP certification
- Several certificates of attendance at Journal Club.
- A poster presentation of an audit on the use of cervical blocks in IUT Clinic

The Statement of Expectations for an ST6 trainee who is meeting expectations in CiP 5 is as follows:

- A trainee who is meeting expectations will continue to make progress in the areas covered in their earlier training programme
- They will use an evidence-based approach to patient care in most situations

- They will be able to communicate research results to service users in an unbiased manner with support and encouragement
- They assist service users to make valid consent decisions on some occasions, but may need support to do so
- They take a role in development of local guidance, problem solving and innovation when prompted and may be able to support others to do the same on some occasions
- They can communicate results and critically appraise their own work with support
- They understand and use SMART objectives to set personal development goals with guidance.
- The trainee will be giving reassurance that they are continuing to improve in the areas covered in their earlier training and making reasonable progress in acquiring additional key skills.

You discuss this CiP and your request to be signed off with your ES at your next meeting. The ES considers the key questions:

**Is this sufficient evidence to sign off the CiP? Am I happy there is evidence to support the acquisition of key skills?**

In this case, very superficial evidence has been provided without evidence of application to practice. In addition, the evidence is suitable for a much more junior trainee and does not demonstrate the level of practical application required from any of the research activity that has been carried out.

**Is this the best evidence? Would some of this evidence be more appropriate in other CiPs as evidence? Is there other evidence that has been missed?**

The activity provided as evidence in this section is a basic audit and would be better linked to CiP 4. However, further value for this CiP 5 could be gained by conducting a literature search of evidence for/against cervical blocks, suggesting evidence-based improvements based on the findings of the audit, designing an implementation strategy which would include a local presentation of current evidence and its implications for practice.

**Is the level right for this trainee? Are they meeting the standards of expectations?**

There is no evidence of active participation in research or research processes, innovation or implementation of research findings. During Phase 3 of CSRH training, the trainee would be expected to show evidence of implementation of innovation and plans for early evaluation.

The ES declines to sign off the CiP as they feel that the evidence is not of the quality or standard expected of a senior trainee and lacks proof of active participation in the activities and processes required. The evidence does not show how the trainee is using theoretical knowledge gained earlier in the training programme in their current practice.

The ES and trainee discuss how to achieve this by the end of the year. The ES suggests conducting a literature search on the evidence base for cervical blocks at the time of IUS/D insertion and comparing the findings to current practice within their service, suggesting changes to practice where appropriate. In addition, evidence of explaining the rationale for any change to other staff members and an implementation plan would demonstrate how the trainee is translating their skills in research into everyday practice.

The trainee has submitted a current GCP certificate. Are they recruiting to trials? If not, are there any trials that their service could recruit for and how would they express an interest and become a recruiting centre? The trainee could investigate this possibility further and include a reflection on it. The ES emphasises that formal research with peer reviewed publication is not required, but it is important for a practising doctor to be able to contribute to research and apply the key findings of research. The trainee leaves the meeting knowing what needs to be achieved, having updated their Personal Development Plan.