

CIP GUIDE

Statement of Expectations and Guidance for CiP 4

CiP 4: The doctor is able to manage data and digital information appropriately and design and implement quality improvement projects.

1 What is this CiP about?

This CiP is designed to ensure that trainees in CSRH acquire the skills, knowledge and attributes needed to access, use, store and manage data and digital information in accordance with all current relevant legislation and to be able to gather and use data to design and implement QI projects or interventions. It is expected that a consultant in CSRH would be able to design and lead such projects in order to bring about positive clinical change. It is also expected that by the end of training doctors will have the skills to evaluate the work of others and implement improvements in care or service locally.

During training, doctors should be exposed to and participate in a wide variety of QI projects 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 indeed when they have not, are all skills that should be developed and consolidated as training progresses. Here are the GMC-approved key skills and descriptors.

| Key Skills | Descriptors |
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| Works effectively within the digital environment | <ul style="list-style-type: none"> • Understands the principles of data governance and the legislation around data protection. • Demonstrates proactive and responsible interaction with digital platforms. • Effectively signpost patients and health professionals to patient support websites and networks. • Works with patients to interpret information in the public domain. • Demonstrates ability to interact appropriately with public concerns and campaigns. |
| Understands quality improvement (safety, experience and efficacy) | <ul style="list-style-type: none"> • Understands the difference between quality improvement and research. • Understands quality improvement methodology. • Understands the concept of big data and national clinical audit. • Appreciates the importance of stakeholders in quality improvement work and encourages the involvement of service users. |
| Undertakes and evaluates the impact of quality | <ul style="list-style-type: none"> • Is actively involved in quality improvement initiatives. • Shares learning effectively. • Evaluates quality improvement projects and how these can work at local, regional and national level. |

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| improvement interventions | |
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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.

Statement of expectations: CiP 4

ST1-3
Meeting expectation

A trainee who is meeting expectations understands the principles of data governance and legislation around data protection. The trainee will understand the concept of responsible interactions with digital platforms and is able to signpost patients to relevant digital sources of information and support. The trainee will understand quality improvement and the importance of evaluating the impact of QI interventions. They will understand the differences between QI projects, research and audit and will recognise the importance of participation in quality improvement projects. They will have participated in QI projects with senior supervision, contributing to the delivery and implementation of the outcomes. The trainee will begin to develop an awareness of the governance structure within which the QI project is undertaken.

ST4-5
Meeting expectation

A trainee who is meeting expectations will demonstrate and model responsible interactions with digital platforms and is able to help patients interpret information in the public domain. They will continue to be involved in quality improvement and will evaluate the impact of QI interventions with support. They will continue to make good progress in the areas covered in their earlier training programme. They will have participated in a QI project under senior supervision with

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| | <p>involvement in delivering an outcome of a QI project. They will have identified stakeholders and effectively shared learning and implementation of change. They will have participated in development and implementation of local guidelines or SOPs under senior supervision. The trainee may be supervising other staff conducting audits.</p> |
| <p>ST6 Meeting expectation</p> | <p>In addition to the earlier levels outlined, a trainee who is meeting expectations is able to use a variety of sources of digital information to assist and empower patients to optimise their own health and wellbeing. Additionally, they will also demonstrate the ability to interact appropriately with public concerns and campaigns. The trainee who is meeting expectations understands quality improvement, undertakes and evaluates the impact of QI interventions and will continue to make good progress in the areas covered in their earlier training programme. They will understand the importance of QI at local, regional and national level (clinical audit, guideline development, implementation of national guidance and service improvement). They will proactively have identified, initiated and led a local, regional or national QI project. They may have supervised more junior colleagues in QI projects. They will be able to evaluate and maximise the successful outcome of a QI project and the implementation of change. They will be able to initiate and lead the development and implementation of local or regional guidelines under senior supervision</p> |

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

- CbD
- Involvement in an annual audit including presentation
- Completion of an audit cycle
- Presentation/Publication of audit or QI project
- Cost-benefit analysis
- Patient experience surveys
- Development of patient information
- QI/Service Development Project
- Attendance and participation in local and regional governance and audit meetings

- Information Governance training at a local level
- Implementation and adaptation of guidelines
- Contribution to development of relevant guidance
- Incorporation of alternative technologies (e.g. telephone, apps and video) into service protocols for consultations and patient information

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.

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 4 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:

- Deanery teaching session on quality improvement, including QI tools such as PDSA cycles
- Reflection on what they had learned and how they used this in plans for a subsequent QI project
- Submitted plans for a QI project with consultant support looking at reducing DNA rates in LARC clinics
- Evidence of feedback regarding a guideline from colleagues on Emergency Contraception that they are currently updating.

As ES, you have discussed both projects with your trainee at one of your recent meetings. You know they are being well supported and you have had feedback from your consultant colleague about their commitment to getting the QI project started. Looking at their mid-year TO2, this also comments on their commitment to the department regarding the updating of guidelines, but the trainee has not linked this evidence.

The statement of expectations for an ST2 trainee who is meeting expectations in CiP 4 is as follows:

- A trainee who is meeting expectations understands the principles of data governance and legislation around data protection.
- The trainee will understand the concept of responsible interactions with digital platforms and is able to signpost patients to relevant digital sources of information and support.
- The trainee will understand quality improvement and the importance of evaluating the impact of QI interventions.
- They will understand the differences between QI projects, research and audit and will recognise the importance of participation in quality improvement projects.
- They will have participated in QI projects with senior supervision, contributing to the delivery and implementation of the outcomes.
- The trainee will begin to develop an awareness of the governance structure within which the QI project is undertaken.

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 but you may suggest linking the TO2 feedback and presenting the results to the department as part of evidence for this CiP for ST2.

Example 2 – ST6 trainee (trainee focus)

You are an ST6 trainee considering sign-off for CiP 4. You are 7 months into ST6 and have submitted the following evidence linked to the CiP:

- A complete audit cycle on uptake of LARC at first appointment and initiated changes resulting in an increased uptake.
- Involvement in a QI project being led by another Consultant on the posting of medications
- Involvement in production of patient information animation on having an implant fitted

The Statement of Expectations for an ST6 trainee who is meeting expectations in CiP 4 is as follows:

- In addition to the earlier levels outlined, a trainee who is meeting expectations is able to use a variety of sources of digital information to assist and empower patients to optimise their own health and wellbeing.
- Additionally, they will also demonstrate the ability to interact appropriately with public concerns and campaigns.
- The trainee who is meeting expectations understands quality improvement, undertakes and evaluates the impact of QI interventions and will continue to make good progress in the areas covered in their earlier training programme.
- They will understand the importance of QI at local, regional and national level (clinical audit, guideline development, implementation of national guidance and service improvement).
- They will proactively have identified, initiated and led a local, regional or national QI project.
- They may have supervised more junior colleagues in QI projects.
- They will be able to evaluate and maximise the successful outcome of a QI project and the implementation of change.
- They will be able to initiate and lead the development and implementation of local or regional guidelines under senior supervision
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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 support sign-off of the CiP? Am I happy there is evidence to support the acquisition of key skills?

In this case there are 3 projects that the trainee has been involved in which demonstrate the key skills within the CiP. However, the trainee has not demonstrated involvement at an appropriate level of responsibility and ownership. The statement of expectation is clear that a trainee in ST6 should be designing and leading QI projects and supervising more junior members of the team.

Is this the best evidence?

The type of evidence is appropriate but the projects have not been undertaken at the

correct level for stage of training.

Is the level right for the trainee?

No, the level is more appropriate for an ST4-5 as there is no leadership of a QI project. Based on the available evidence, the ES feels unable to sign the CiP off at ST6. The trainee should concentrate on identifying a QI project which they are then able to lead through to completion.