However, some resources are not fully utilised such as KIT days and a 'supervised-on-call' period. Increased awareness of the policy and implementation of RTT meetings is required alongside increasing accessibility of training-resources to enable appropriate tailored support for returning-trainees.

G403(P) MOODSEY: DEVELOPING A THEMATIC REAL-TIME STAFF MORALE TRACKING MODEL

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Aims To develop a method of continuous assessment of subjective staff morale reporting and use the reporting data to inform improvements to staff wellbeing.

Methods A system, entitled MOODSEY, was developed asking multidisciplinary staff in a busy urban paediatric unit to anonymously retrospectively rate each shift as a 'Good Day' or 'Bad Day' at its conclusion. Broad demographic information was collected to aid with subgroup analysis. 'Complete' data required all 4 fields completed. This data was aggregated, and a score was plotted on a run chart.

Prior to data collection, a listening exercise occurred to generate themes that staff reported as affecting their shifts. When reporting, staff were encouraged to signal which of these themes had led to their choice. These themes were aggregated and analysed using the Model for Improvement to inspire changes that would improve future scores & the frequency of themes being reporting.

Paper and digital reporting techniques were designed to be minimally time-consuming and local champions encouraged reporting

Results The unit average MOODSEY score was plotted on a scale of -1 to +1 plotted on a run chart. In the first 2 months of reporting, a median score of 0.7 with statistically appropriate variability was found. Statistically significant shifts were seen for both positive and negative reporting.

Thematic data showed that negative reporting was most commonly associated with Poor Staffing, Incivility and Unsupportive Seniors whilst positive reporting was associated with a Good Atmosphere, Good Teamwork and Supportive Seniors.

885 responses were collected in total (mean: 12.5 responses/day). The presence of champions on shift improved response rate for all roles. 66% of reporting cards were completed fully.

Conclusion The MOODSEY system has proven the concept of 'smart real-time monitoring of staff morale'. Thematic analysis correlates with existing findings in the literature. Further iterations are required to integrate the project into the department however the encouraging initial success gives a platform for ongoing assessment of work aimed at staff wellbeing.

G404(P) SEEING STARS – THE INTRODUCTION OF MOTIVATIONAL TRAINEE STAR CHARTS: A QUALITY IMPROVEMENT PROJECT

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The aim of our project was to introduce an initiative to support completion of supervised learning events (SLEs) and to encourage praise of trainees' successes with the goal of improving the quality of paediatric training and to boost trainee's morale.

All paediatric trainees are required by the RCPCH to collect a portfolio of various (SLEs) during their rotations, however finding the time to complete these assessments can be challenging. Furthermore, although there are systems in place for reporting error and malpractice within the NHS, there are few initiatives that promote the recognition of positive achievement.

We conducted a short questionnaire amongst paediatric trainees from ST1-ST8 looking at trainees' experiences in gaining SLEs, and on the effect of SLEs on trainee satisfaction. We found that the majority (>50%) of trainees did not feel supported in gaining SLEs during their placement. We also found that the majority (>70%) of trainees felt that receiving praise for successfully completing SLEs significantly affected their job satisfaction. Unfortunately, few trainees reported receiving this praise in practice.

We then introduced motivational trainee star charts. For ST1-ST8 trainee's stars were awarded for the completion of a variety of clinical procedures. For ST4-ST8 trainees and for consultants stars were also awarded for completing supervised clinical examinations, case-based discussions and direct observed procedures with junior trainees.

Following the intervention we carried out a further survey to analyse the impact of the star charts on trainee's motivation. The majority of trainees reported an increased number of SLEs gained per week following the intervention (88%) and that they felt better supported to complete SLEs by seniors (88%). There was an overall increase in job satisfaction (100%) and it was reported that they found it easier to share opportunities with peers to perform skills (100%).

Due to the success of the project the star charts were taken on by the department and were used for subsequent cohorts of trainees.

G405(P) USING DIGITAL MEDIA TO IMPROVE ACCESS TO TEACHING

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Method Uptake of traditional face-to-face MRCPCH written exam teaching sessions in Wales has been poor for three years despite interest being high among trainees. The aim of this project was to explore examinee experiences with the teaching programme and to use learner suggestions as part of a collaborative process to design a new teaching programme.

A survey was sent to doctors working in paediatrics in Wales. Data was collected from February until March 2019. Questions included quantitative information on exam teaching uptake as well as qualitative questions on suggestions for improvement. Results were then used to design a new teaching system.

Results There were 17 respondents. Reasons given for not attending teaching included having prior clinical commitments (47.1%) or the teaching being held too far from their base hospital (11.8%). The two most popular suggestions to

improve teaching were to 'improve access' and to 'teach on difficult topics specifically', with teaching preferably delivered online.

Conclusion Teaching materials previously delivered in teaching sessions were recorded and are always now accessible online. A number of other changes were also introduced or are in development; the introduction of a peer-support network amongst trainees, mentorship support for those trainees struggling with exams and congratulatory emails sent to trainees from the Head of School once they'd passed exams.

The biggest development was a new podcast, 'DragonBytes'. Initially aimed to tackle difficult topics identified by trainees, such as metabolic conditions, the podcast now aims to support trainees more holistically with training. Episodes cover a wider range of topics; reflective writing, careers advice, and so on. Since launch, 395 people have listened, and the website has had over 250 unique views. The most popular episode, 'Top Tips for Passing Written Exams' had 88 listens after the first month.

Free open access online medical education (FOAMed) is a growing online trend. DragonBytes has joined this movement by ensuring our material is available to trainees across the UK and advertised to them through social media.

For future work, we aim to evaluate the success of the podcast, and survey our trainees to determine whether these improvements have helped.

G406(P) ACHIEVING CLINICAL EXCELLENCE EDUCATIONAL NEWSLETTER

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Aims Achieving Clinical Excellence (ACE) meetings replaced the traditional morbidity and mortality meetings in a local paediatric department in 2018. This allowed learning to be drawn from positive aspects of care and to develop a Safety-II¹ approach to patient safety. This project utilised an e-newsletter to disseminate the learning from ACE meetings with supplementary educational content. A secondary goal was to boost staff morale through celebrating excellence in the workplace.

Methods A trainee-led editorial team was established at induction to create content for a celebratory and educational monthly e-newsletter. A free online design and publishing platform was utilised to allow for input from multiple editors and contributors. It was co-ordinated by a senior registrar with supervision from a consultant. The broad sections included:

- Learning from cases – the case-mix ranged from common paediatric presentations to tertiary-level retrieval cases. Content included examples of excellent clinical practice, current guidelines, theoretical knowledge, practical skills refreshers and MRCPC exam tips.
- Public Health information – featuring a 'Health Promotion Post-it'.
- Self-care and resilience – useful tips to thrive and enjoy work.
- Positivity and team celebrations – compliments were published directly from the 'Gold Star' board, a positivity board where any staff member's everyday achievements can

be highlighted. Departmental events and socials were advertised.

Results Over a twelve month period, eleven ACE e-newsletters were created and disseminated across the Trust's two sites. In the latest edition, medical students were supported by the editorial team to have features in the newsletter. Other departments are expressing an interest in producing their own e-newsletter. After encouraging informal feedback following each edition, the team are currently collecting more formalised feedback via survey.

Conclusion Empowering trainees to lead on projects like the ACE e-newsletter enables them to educate and inspire others through shared learning. The newsletters have attracted significant praise from other departments within and across the Trust. Trainees are leading their Paediatric department through a cultural change by utilising Appreciate Inquiry techniques (learning by recognising 'the things that go well' rather than solely identifying errors) thereby learning more holistically from patient safety issues or events.

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G407(P) A SURVEY OF 'IMPOSTOR PHENOMENA' IN FOUNDATION YEAR 1 DOCTORS

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'Help - I'm a fraud get me out of here!'

Background First described in 1978 by Clances and Imes, thoughts of being an 'impostor' at work or university, came to our notice when teaching medical students. Thoughts of being so academically mediocre as to being an impostor often led those more affected students to isolate themselves from informal learning opportunities with peers and from more formal learning supports offered by the university. We became concerned that such thoughts may be more common when students undertake their first year of clinical practice post qualification. Identifying those at risk could lead to offers of greater learning support.

Aims Our primary aim was to ascertain the frequency of impostor phenomena (IP) in newly qualified doctors. A secondary aim was to see whether self-reported changes in self-efficacy (SE) predicted increased risk of impostor phenomena.

Methods All foundation year 1 doctors (2018–2019) were invited to complete the 'Clance Impostor Phenomenon Scale', in addition to baseline data (including age, gender) and a question on changes to self-efficacy since starting the programme. Invitations included an information sheet and respondents could complete the study either online or on paper. Consent to participate was obtained in writing from each respondent. The study was considered to be one of *evaluation of service* by the hospital's ethics committee.

Results 31 responses, 2 excluded (incomplete). 94% of the scores showed impostor phenomena.

- 52% reported moderate to intense impostor phenomena