Aims Passing the MRCPCH Clinical exam is an important milestone in paediatric training, marking the transition of paediatric trainees from junior to senior training. Support for candidates varies by hospital, depending on the availability of tutors and the workload of each department.

The COVID-19 pandemic led to redeployment of staff, increased workloads, and changes in the format of the MRCPCH clinical exam, switching from in-person to virtual examination. Candidates had to adapt to all these challenges simultaneously. We identified that providing additional support to candidates was critical to their preparation, maintaining their confidence, and ensuring their success, whilst also improving their welfare during this difficult period.

Methods We designed the 5-week West Midlands Paediatrics (WMP) exam preparation programme which included these core elements:

- Weekly consultant-led communication teaching
- Weekly buddy group teaching and peer mentorship
- Online resources: specialty lectures by Grid trainees available via YouTube
- IMG focused workshops and seminars

To improve accessibility, all sessions were conducted online via Zoom or Microsoft Teams. All mentors were provided with a bank of cases and questions based on a weekly theme to practice the exam in real time.

Results Following the initial implementation of the programme, feedback was collated from 24 trainees.

Consultant Teaching • 88% of candidates found the consultant teaching useful.
- Candidates appreciated getting feedback from consultants who are also clinical examiners and the opportunity to practice the exam in real time.
- Most candidates said having more sessions would ensure each candidate gets individual feedback following the practice sessions.

Buddy Group Teaching • 80% of candidates found the buddy group teaching useful
- Candidates found that this provided another platform to practice and gain feedback and learn from different candidates in the groups.
- Candidates felt it could be improved by providing more support with issues such as work-life balance and well-being.
- Some trainees also reported difficulties accessing the buddy group sessions due to conflicting schedules.

Teaching strategy • 92% of candidates said they would like more specialty and case-based teaching
- 38% of candidates would like more lecture-based teaching

Candidates found the following resources most helpful:
- Consultant Teaching
- Buddy group and mentorship
- YouTube lectures and Video resources

Pass Rate 66% of candidates passed the MRCPCH Clinical exam following the programme.

Mentor Recruitment 88% of candidates said they would be happy to become mentors after passing their clinical exam.

Candidates recommended hospital-based mentoring and mock exams as other ways to improve the preparation programme.

Conclusion The WMP exam preparation programme is a useful and valuable aid to revision for candidates preparing for their exams. The MRCPCH clinical examinations move back to in-person sittings, adaptations may have to be made to the programme to ensure that it continues to provide support for our post-graduate learners.

LEARNING HOW TO TODDLE: THE BUILDING BLOCKS TO DEVELOPING YOUR PAEDIATRIC PORTFOLIO AND CAREER

Aims The need for specialist training in Paediatrics has increased with developing technical complexity and advances in children’s medicine. To meet this demand, recruitment and retention in Paediatrics is essential. Early exposure and support to this diverse vocation is warranted. Early exposure and support to this diverse vocation is warranted. 1-3 Paediatric career advice is rarely discussed at depth, both intra- and extracurricularly. It provides vital support for medical students and doctors pursuing Paediatric careers and provides foundations for career building excellence. This ensures competency in our graduates and applicants as they prepare to treat the children of tomorrow. In order to fill this teaching gap, ‘TODDLE: The building blocks to Developing your Paediatric portfolio and career’ was created by Edinburgh University Paediatrics Society (EUPS). This abstract will define plans for this series and analysis of benefit.

TODDLE aims to equip medical students and F1s with knowledge about the career pathway and Paediatric portfolio via a comprehensive set of 5 virtual webinars spanning March to April. The course will run completely free and online for increased accessibility. Tutors will consist of Paediatric trainees and medical students, sharing their experiences and expertise, while facilitating networking and informal mentorship.

Methods Each webinar consists of a 30-minute trainee-led talk and a 15-minute student-led talk, followed by a Q&A.

Pre-webinar polls will be used to check attendee understanding, demographics, and opinions. Post-webinar, feedback forms will be sent out to assess factors relating to experience and value of the series, including free-text. To assess course impact we will analyse attendee feedback to quantify usefulness of this series to aspirant Paediatricians.

To further enhance the value of this course for participants, attendees of 3/5 webinars will receive a SPHERE-accredited certificate for their portfolios.

Results A preliminary scoping poll at the University of Edinburgh was answered by 9 preclinical and 11 clinical medical students. Primary results (figure 1) found 70% disagreeing that they had enough Paediatric application information from medical school, with survey-goers wanting to learn more about building a competitive Paediatric portfolio/CV, as well as the career/application pathways. We anticipate final results to support the need for more Paediatric career advice to medical students.
students and FYs, and the benefit of a career teaching series. While EUPS strives to support students, improvements in the formal curriculum by medical schools play a key role in nurturing aspiring Paediatricians.

Methods

20 core topics for weekly themes were identified from the RCPCH and GP trainee curricula. Core educational events including SHO peer teaching, consultant led session, journal club and simulation scenario all mapped to the weekly theme and delivered consistently wherever safe staffing and emergency cover allowed.

Both fellows were enrolled in PGCert programmes (EF - Clinical Education, SF – Simulation in Clinical Practice) at Brighton and Sussex Medical School to enhance their skill base and ability to deliver upon the post objectives. The educational theory covered within these programmes was directly applied to the structure of the new education programme – principally the concepts of constructivism and spiral learning through the weekly themed approach.

Infrastructure was created to assist both rollout and sustainability of the scheme, including: weekly education summary and calendar email, simulation library and presentation archive.

The outcomes for the education programme were evaluated via a departmental questionnaire, GMC survey results and local faculty group feedback.

Results

GMC National Trainee Survey showed a satisfaction score in 2019 of 55.95 (lowest quartile), in 2021 this significantly improved to 74.44. Local questionnaire demonstrated 83.3% of junior doctors rated departmental teaching as excellent overall, with 66.7% rating topic of the week as helpful and 100% reporting curriculum needs met. 66.6% of trainees reported that they found the weekly theme helpful in preparing teaching sessions, with the remaining 33.3% finding it occasionally difficult to think of an appropriate subject. The majority of respondents rated all teaching formats as useful or very useful. Informal qualitative feedback from the team was largely positive.

Conclusion

The presence of fellows with dedicated educational administrative time was instrumental in embedding a new educational theory-based system within the department, which led to significant improvement in satisfaction ratings. This has supported a sustainable change to ensure key learning outcomes are achieved throughout the department. Education based fellow posts provide high quality personal professional and educational development as well as leadership and organisational experience within a critical realm of paediatric medical training, whilst providing a clear framework to best meet the educational needs of the whole team as the trainee charter recommends.