undergraduate clinical skills assessments. It comprised a sequence of five videos of students, each presenting a clinical case (history and examination of a child). These case presentations were scored (scale 0–15 for the total score) by examiners online using an interactive mark sheet that automatically recorded the scores. Subsequently, examiners could compare their scores against an average given by a panel of senior expert examiners. In addition, recorded data were analysed for overall mean scores and standard deviation (SD). The students were ranked according to performance (1 excellent, 1 clear fail and three in between) using predetermined criteria.

**Results** Total of 31 participants, 18 of them fully completed the online package.

**Abstract G04 Table 1**

<table>
<thead>
<tr>
<th>Student</th>
<th>Number of examiners</th>
<th>Trainee examiners</th>
<th>Average score (+/- SD)</th>
<th>Expert examiners</th>
<th>Average score (+/- SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1(excellent)</td>
<td>31</td>
<td>12.7 (+/- 2.1)</td>
<td>13.2 (+/- 1.8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>22</td>
<td>8.4 (+/- 2.1)</td>
<td>9.0 (+/- 2.7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>18</td>
<td>8.2 (+/- 2.6)</td>
<td>9.1 (+/- 0.8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>18</td>
<td>12.5 (+/- 2.2)</td>
<td>11.1 (+/- 1.9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5(clear fail)</td>
<td>18</td>
<td>1.4 (+/- 2.0)</td>
<td>2.0 (+/- 1.7)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Conclusions** Trainee examiners considered the tool helpful, especially if they were to perform the clinical skills assessments for the first time. Results demonstrate variation of scores is higher among trainee examiners, apart from student number 2. Overall scores given by trainee examiners tend to be lower compared to experienced expert examiners.

**G05**

A PAEDIATRIC PEER MENTORING PROGRAMME OFFERS SIGNIFICANT BENEFITS TO BOTH JUNIOR AND SENIOR TRAINEES

doi:10.1136/archdischild-2013-304107.018


**Aim** Mentoring has been identified as an important process in personal and professional development for doctors. Peer Mentoring is a core skill specified within the RCPCH curriculum. We developed, implemented and evaluated a Programme for provision of Peer Mentoring within our School of Paediatrics.

**Methods** 18 junior trainees received individual Peer Mentoring from a specifically trained senior trainee over a one year period. 18 Peer Mentees were randomly selected from volunteers recruited at the regional ST1 Induction. 18 Peer Mentors of ST5 level upwards were recruited and selected by anonymised competitive application.

Peer Mentors undertook a tailored programme of training, with defined learning objectives, mapped against established standards. This was subsequently reinforced by experiential learning which included regular meetings with the Peer Mentor, completion of a reflective portfolio and attendance at facilitated Action Learning Sets.

**Results** 90% of ST1 trainees expressed interest in participating in the Programme. We recruited to capacity and 16/18 pairs successfully completed the Programme. Satisfaction was high: 100% of Peer Mentors and 82% of mentees enjoyed the experience of participating in the Programme. 100% of Peer Mentors and 94% of mentees felt the Programme to be useful.

**Subjects** discussed in sessions were predominantly work-related; professional development and accessing learning opportunities were discussed by 94% of pairs, followed by work-life balance and performance issues (both 82%).

Both Peer Mentors and Mentees reported acquisition of a wide range of skills useful for a range of applications. 94% of Peer Mentors wished to continue in this role and all intended to use the skills in their workplace and, last, as an Educational Supervisor. 77% of Peer Mentees reported greater proactivity in seeking new learning opportunities and improved decision-making skills. Improved stress management was also mentioned. 75% reported enhanced ability to deal with new situations and 88% reported improved self-confidence. 76% reported a positive change in their overall outlook and approach to their professional lives.

**Conclusion** Our successful Programme represents a novel and sustainable approach to meeting both the demonstrated demand and the RCPCH curriculum requirement for Peer Mentoring. Both Peer mentors and mentees developed versatile and sustainable skills for their future.

**G06**

IS IT POSSIBLE TO PRODUCE A RELIABLE PORTFOLIO ASSESSMENT TOOL?

doi:10.1136/archdischild-2013-304107.019

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**Background** Portfolios are a compilation of evidence that through critical reflection of their contents demonstrate personal and professional development along with achievement. Portfolios are being used increasingly for summative purposes within the medical profession and are highlighted as potential assessment tools for professional competence. The most often cited limitation of the use of reflective portfolios is the lack of reliability with which they can be assessed.

**Aims** To design a portfolio assessment tool and investigate the tool’s reliability. We aim to assess both intra and inter-observer reliability.

**Methods** The study took place over 5 months. We studied nine e-portfolios belonging to Specialist Trainees in Paediatrics within a specific Deanery. Appropriate consent and ethical approval were obtained. We asked Consultant Paediatricians who are educational supervisors to mark each of these portfolios using a newly designed assessment tool. These marks were anonymously collated, and by assessing this data we were able to look for consistency in the marks awarded for each portfolio, and use statistics to determine reliability of our assessment tool.

**Results** Nine portfolios were assessed by eight assessors. The results showed low inter-rater reliability of the assessment tool. Aiming for mean differences (bias) close to zero, the inter-rater bias ranged from 3.6% to 19%, with standard deviations ranges from 6.3 to 10.2. Intra-observer reliability was better (bias of 1.1%, SD of 5). Aiming to achieve a kappa score of >0.8 for summative assessments, our kappa scores ranged from 0.2–0.72 for inter-rater reliability and was 0.59 for intra-rater reliability.

**Conclusion** Judging the quality of a reflective portfolio is becoming increasingly important with their use in summative assessment and revalidation. Our study has shown that individual assessments using our portfolio tool show poor inter-rater reliability and are untrustworthy in high-stakes assessment. Improved rater training and multiple rater assessments are likely to improve this reliability but further research would be needed to assess this.

**G07**

THE IMPACT OF START: DRIVING THE LEARNING

doi:10.1136/archdischild-2013-304107.020

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**Aims** START is designed to assess the readiness for consultant practice of senior trainees. Consensual validity is reported by examining adjustment in trainees’ behaviour and practise following feedback from START. These data will inform level 3 training needs and development of the new START assessment.