

Appendix G

Quality Improvement Project Guidance for Core trainees

Yorkshire and Humber School of Psychiatry Requirements

The trainee must demonstrate evidence at each ARCP of involvement in a Quality Improvement Project.

The specific curriculum learning objectives of *develop the ability to conduct and complete audit in clinical practice* (ILO12) and *develop an understanding of the implementation of clinical governance* (ILO13) are relevant to this section but the ARCP panel will also be looking for evidence of attainment in related ILOs, namely: *leadership skills, time management and decision making, teach, assess and appraise, research methodology and critical appraisal, habits of lifelong learning and reflective practice*.

Most trainees will have undertaken clinical audit prior to CT1 and there is little value in repeating the same project methodology during each year of core training. It is important that clinical governance expertise is developed by exposure to different Quality Improvement methodologies in order to enable a deeper understanding of the way in which healthcare systems influence clinical outcomes.

A minimum of three projects are required over the three-year period of core training, there should be a minimum of one clinical audit project and a minimum of one other project format. Two projects over the course of core training would be acceptable where a trainee undertakes a supervised research project (the other project would be a clinical audit). The following list of potential projects is a non-exclusive guide:

- Service evaluation e.g.
 - Clinical audit project
 - Service evaluation survey or review
- Service development e.g.
 - Clinical guidelines
 - Policy / procedure development
 - Application of specific Quality Improvement methodologies to a service
- Risk management e.g.
 - Involvement in critical incident review
 - Analysis of incidents or near misses
- Research and development e.g.
 - Involvement in research project
 - Literature review
- Education e.g.
 - Organisation of teaching or training programme
 - Development of teaching materials (including for patients and carers)

For each project there should be:

1. A written report of the project e.g. Word document, Powerpoint presentation, Poster presentation, submission for publication. A certificate denoting project involvement would not be sufficient. The report should address: rationale, aims, standards (where

applicable), literature review (where applicable), methods, results, conclusions, outcomes and clinical impact.

2. Attached reflective template countersigned by project supervisor (Appendix 1).

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Appendix 1. Reflective template for Quality Improvement project

Project Title	
Project Supervisor	

What is the question or problem this project attempts to solve?
What was the method I used to solve the question or problem?
What was my role in the project?
What was the outcome of the project?
How was the project outcome disseminated?
What has been the response within my service to the project?
Has the project led to a change in practice?
Were there any barriers to change?
What have I learned from the process of undertaking this project?

What would I do differently if I did this project again?

Project supervisor comments:

Supervisor Name	
Supervisor Signature	
Date	