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## Doodling Docs for DOPS

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# Doodling Docs for DOPS: an innovative approach to procedural skills training for core medical trainees

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## Aims

To provide timetabled opportunities for core medical trainees (CMTs) at the Royal Free Hospital to practise essential procedural skills under direct supervision by expert clinicians, with a view to gain the required competences for Annual Review of Competence Progression (ARCP).

## Methods

An online survey using SurveyMonkey was created for CMTs to determine their pre-existing experience in essential procedural skills, how confident they felt performing these procedures, and how often they were receiving opportunities to practise and be supervised by expert clinicians. Permission was gained from heads of department to set up a programme from October 2016 – July 2017, offering trainees the opportunity to attend specialty-led lumbar puncture, ascitic drain and pleural procedure clinics where they could be observed by a trained clinician and signed off for formative and summative direct observation of procedural skills (DOPS) assessments. A Doodle poll was created offering trainees unlimited daily to weekly slots, depending on the procedure being booked. A WhatsApp group was set up for informal feedback and slot swaps. At the end of the pilot programme, an online survey was created to determine how valuable the trainees had found the programme.

## Results

See Table 1.

## Conclusions

CMTs found it difficult to gain access to procedures essential for completion of ARCP and progression to medical registrar roles. This led to poor experience and a lack of confidence performing the procedures. The introduction of a bespoke procedural skills programme, based at the Royal Free Hospital and created for CMTs to obtain procedural competences, helped trainees gain experience and confidence in performing essential procedures, offered them daily to weekly opportunities throughout the training year, and ensured that they received formative and summative DOPS assessments from experienced supervisors. This model can be replicated in other trusts that provide the same procedural services, and has the potential to improve ARCP outcomes and increase confidence for CMTs progressing to medical registrar roles on a national level. ■

## Conflict of interest statement

No authors have any conflict of interest to report.

**Table 1. Comparison of core medical trainees survey responses pre- and post-programme**

	Pre-programme			Post-programme		
	Pleural procedure	Ascitic tap/drain	Lumbar puncture	Pleural procedure	Ascitic tap/drain	Lumbar puncture
Respondents (out of 22)	19			14 (100% participation)		
Experience (performed >2 times)	40%	32%	79%	100%	100%	100%
Confidence with procedure (clinical independence)	0%	26%	57%	21%	64%	85%
Difficulty accessing procedure	73%	47%	21%	n/a	n/a	n/a
Signed off by experienced supervisor	74%	79%	95%	100%	100%	100%

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