What do junior doctors think about their mandatory management development programme?

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Background: Since 2009 a management development programme of 30 ETCS is mandatory for all physicians and dentists in specialty training at the University of Helsinki. We wanted to find out their thoughts on the usefulness of this programme.

Summary of Work: We used the numeric (Likert-scale 1-5, where 5 = totally agree) and written feedback (n = 134 junior doctors) on three two-day learning modules and analysed it with quantitative and qualitative content analysis.

Summary of Results: The topic of the module was found interesting by 77% (Likert values 4-5), and 68% said that it was of use for their work. There was some variance according to the learning module: 1) Leadership and organisation (useful by 69%), 2) Ethics, law and patient safety (useful by 81%), 3) Processes and resource management (useful by 54%). “The most important lesson for me was how much management and leadership is linked into “ordinary” doctor’s work.” “You can memorize the rules and regulations but more reflection and practice is needed for good people skills.”

Discussion and Conclusions: Evidence suggests that effective clinical leadership yields superior clinical outcomes. The leadership responsibilities may be unexpected for frontline junior doctors because their training does not focus too much on leadership. Mandatory management development programme addresses these shortcomings.

Take-home messages: The feedback is valuable for programme improvement, but decisions on its content have to be made with the overall aim in mind: better specialists. Including mandatory components is a way to reconstruct specialist training.

Developing a project management skills workshop to improve the quality of student-led community involvement projects (CIPs)

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Background: Project management skills are not part of formal curriculum for most medical schools. However, given the nature/interest of students, CIPs are a large part of student life. We thus initiated a program to educate students on how to conduct safe, meaningful and sustainable CIPs using skills such as the Theory of Change and the Logic Model.

Summary of Work: 2 pilot workshops were run in 2014/5 - one involved students well experienced in CIPs, the other novices. Through lectures and small group discussions around real-life situations, students were taught to use the logic model, conduct a needs analysis, perform risk and safety assessments, and implement monitoring and evaluation plans. They were asked to design and present new CIPs using preset scenarios to experienced faculty, and to implement changes in their existing CIPs. The effect of these workshops on project management skills knowledge and impact on existing CIPs were assessed via pre/post surveys.

Summary of Results: 45 students were assessed. All students felt the skills taught were practical and applicable to their CIPs. Students’ knowledge scores pre- and post- workshop significantly improved across all domains (p<0.001) regardless of prior CIP experience. Post workshops, 100% of students surveyed had implemented improvements to their existing CIPs to improve effectiveness, sustainability and safety.

Discussion and Conclusions: Creating awareness of project management skills and facilitating transfer of knowledge is possible through customized skills-training workshops utilizing a situation based learning approach.

Take-home messages: Acquisition of project management skills is crucial to the success of CIPs and should be considered taught in medical schools involved in CIP work.
Development of leadership and management skills through undertaking a service improvement project

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Background: In today’s ever-changing health care environment, doctors require leadership and management skills to enable them to provide direction for the generation of new pathways and guidelines. In recognition of this, we, as trainees, have designed and undertaken a quality improvement project to introduce routine outpatient management of Hyperemesis Gravidarum in our unit to aid our development of these skills.

Summary of Work: We developed a conceptual framework, approached our consultants and implemented the change through the standard trust pathways, with aim of developing a sustainable guideline. We looked at pregnant ladies diagnosed with Hyperemesis and their management. This information together with published work was used to provide support for our change.

Summary of Results: Following initial introduction, we intend to develop a business case to ensure the service is sustainable. During the project, we were able to develop our leadership skills through experiential learning, supported by a peer mentor.

Discussion and Conclusions: People and organisations who seek to promote more sustainable practices as ‘agents of change’ typically face considerable challenges. We tackled these challenges in a methodological way,initiating with gathering knowledge from some guidance and research work, formulating evidence-based strategy and approaching and interacting with enthusiastic and experienced leaders to guide us and included inputs from target audience. This project was a big learning curve and inculcated motivation, assertion, systematic planning, persevering and accepting responsibility and many more qualities of a successful leader.

Take-home messages: Traditionally management and leadership roles are taken up later in the career pathway. We believe our experience demonstrates how encouraging the development of leadership and management skills through undertaking service improvement projects early in the medical career pathway can have benefits for both, the individual and the organisation.

How do a cohort of final year medical students perceive compulsory MLM teaching? A pilot study

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Background: With the aim of providing excellent patient care, the GMC’s 2009 “Tomorrow’s Doctors” recommended the incorporation of effective medical leadership and management (MLM) into undergraduate education. However, medical student exposure to MLM remains highly variable between universities.

Summary of Work: The Birmingham Medical Leadership Society and the medical school arranged a compulsory lecture for a cohort of final year medical students. Two local hospital managers delivered the lecture. Attendees completed anonymous evaluation forms after the event to investigate attendee demographics, perceived usefulness of the event, knowledge gained, and relevance to attendees’ career motivations and ambitions.

Summary of Results: 146 attendees completed feedback forms. There was a 2:1 female to male ratio. Knowledge of MLM improved, with the modal answer progressing from 2 before, to 6 after the lecture, on a 0-10 scale. 47% of attendees rated MLM teaching as ‘extremely important’ or ‘important’. Of particular note, 59% of attendees said MLM should be first introduced during the clinical years of medical school.

Discussion and Conclusions: This teaching was generally well received with indications that it improved attendees’ knowledge and understanding. Feedback suggested no preferred mode for MLM learning but open questions suggested optional small-group sessions might be favourable. The importance of MLM was effectively communicated and the compulsory teaching was introduced at an appropriate stage for medical students.

Take-home messages: The majority of students indicated that MLM teaching should first be introduced during the clinical years of medical school. Authors recommend explicitly emphasising the relevance of MLM throughout student’s careers.
Development of a business placement scheme for veterinary students

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Background: The School of Veterinary Medicine and Science, University of Nottingham (SVMS) has an innovative curriculum which includes an emphasis on professional skills and employability. A core business skills element of this curriculum is compulsory for all students. This paper describes the development of an optional business placement scheme, delivering experiential learning in the workplace and further enhancing the employability of graduates.

Summary of Work: Two week placements have been developed in partnership with a veterinary marketing company. Students work alongside consultants visiting practices and producing a "fixer" report analysing business objectives, key performance targets and operational activity. They also participate in teamworking and leadership training.

Summary of Results: Placements have been very popular with students, and feedback from participants, including the veterinary practices involved, is extremely positive. Students also use the placements to engage in reflection around the ethics of business activity, which can be a challenging topic to discuss.

Discussion and Conclusions: It is crucial that learning opportunities for veterinary students include business skills, and these placements deliver teaching in an authentic and engaging environment. SVMS has worked closely with the university careers service throughout this project and it is now included within our employability partnership agreement. Future plans include expansion to other aspects of the industry together with inclusion as a credit bearing module in the voluntary Nottingham Advantage Award.

Take-home messages: Business placements provide a unique opportunity for veterinary students to enhance their employability and ensure they are fully equipped for the workplace.

"Look after the Pennies and Dollars will Look after Themselves" Memorial University's Financial Services Initiative for Undergraduate Medical Students

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Background: Recognizing the unique financial challenges that undergraduate medical students face, Memorial University of Newfoundland’s Faculty of Medicine developed a model that integrates financial education within the new curriculum and provides enhanced supports throughout students’ medical education.

Summary of Work: A formal curriculum that includes instruction on financial aid, debt management and insurance is offered during Phase 1 of the new undergraduate program (first cohort class of 2018). At the end of Phase 4 students will be taught financial transition to residency. Throughout the four phases, individual consultations are provided with a dedicated financial services consultant.

Summary of Results: Results from Memorial’s 2014 Student Evaluation Questionnaire (SEQ) indicate that, for the class of 2018, 82-84% of students were satisfied with different aspects of Memorial’s financial services. These same services satisfied 78% of Phase 3 students, 72-74% of Clerkship Year 1 students, and 52-56% of Clerkship Year 2 students. Results from Memorial’s 2014 Canada Graduate Questionnaire (CGQ) indicate that 41.7% and 14.6% of the class of 2014 were satisfied or very satisfied with financial aid services and 36.7% and 12.2% with debt management counselling.

Discussion and Conclusions: Our data demonstrates that students in the new curriculum are benefiting from the enhanced approach to financial services through changes in our approach to financial services. We anticipate this will continue with future cohorts as the financial support services model is adjusted accordingly.

Take-home messages: Memorial’s curricular integration of financial support services alongside its enhanced financial counselling program is effective in assisting students as they navigate financial issues during their undergraduate and postgraduate medical training.
Triumvirate Leadership Programme for Primary Care

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Background: General Practice is undergoing transformation in the UK in response to changing demands of patient population, public expectations, health budget and technology. Practices are exploring new models of integrated care. The workforce is changing with increased use of nurses and allied health professionals. GP federated groups and super-partnerships are increasing. Based on a ‘triumvirate model’ a leadership programme was developed to support GP practices in responding to the new NHS agenda.

Summary of Work: The aim of the programme was to provide a leadership approach adopted by three key roles within general practice; GP, Practice Nurse and Practice Manager. This triumvirate leadership approach was designed to allow the practices to optimise their success in these challenging times, build sustainability thus unlocking their potential.

Summary of Results: 72 participants from 24 West Midlands GP practices undertook a 9 month leadership programme. Participants met on a monthly basis forming 5 action learning sets. Themes included: Service Redesign, Business Development, Patient Experience, Improving Patient Access, Change Readiness, Leadership in Primary Care, Succession Planning and Programme/Project Methodology. The course ran from March 2015. We will present early outcomes and evaluation of the first 6 months.

Discussion and Conclusions: Leadership training is often based on individuals rather than based on learning with pairs or trios from the same organisation. We believe the triumvirate approach will encourage practice nurses to take on leadership roles within practices, and that changes implemented will be more sustainable.

Take-home messages: The triumvirate approach is a unique and useful model for education especially for quality improvement and leadership.
Overestimating confidence in leadership and management skills among future surgical hopefuils - is there a need for a better assessment tool?

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Background: The need to develop leadership and management skills among medical students is recognised as an integral part of the curriculum and a quality that aspiring surgeons are required to demonstrate on post-graduate applications. This study compared the management/supervisory needs of a group of medical students aspiring to a career in plastic surgery with medical students who had not identified as future surgeons.

Summary of Work: A Hennessey-Hicks Training Needs Assessment questionnaire was administered to undergraduate medical students showing no preference for surgery (n=120) and compared with medical students (n=28) attending the Undergraduate Plastic Reconstructive and Aesthetic Surgery conference (UPRAS) who had all identified themselves as hopeful future plastic surgeons. The questionnaire is a validated tool used to expose disparity between individuals' ability to perform tasks which they perceive as important to their future career as doctors.

Summary of Results: Analysis of the results showed that the students with no preference for surgery perceived managerial/supervisory tasks to be of high importance while ranking their ability to perform them as low. Students attending UPRAS also ranked the management/supervisory tasks of high importance but ranked their current ability to perform these tasks as high.

Discussion and Conclusions: The needs analysis showed that medical students identify leadership/management tasks as being of high importance to their future careers, however, a cohort of medical students with an affinity for a career in plastic surgery perceive satisfactory performance in management and leadership skills.

Take-home messages: Leadership and management skills are important. A robust assessment tool is needed to ensure the perceived improvement in skills is accurately assessed.

Where does the yellow brick road lead? The journey of the Scottish Clinical Leadership Fellows

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Background: In 2009, at the 60th anniversary of the NHS, the Professionalism and Excellence group reviewed NHS Scotland’s working climate and practices. The development of leadership capabilities within NHS Scotland was identified as a key priority. From this review, the Scottish Clinical Leadership Fellows were born. Starting in 2014 and hosted by a variety of government and healthcare organisations, 10 trainee doctors have been employed in the programme.

Summary of Work: Fellows are embedded in these organisations and boards across NHS Scotland and carry out a variety of networking roles, attendance and input into committee and board meetings as well as work on projects based within their host organisations. We are part of the wider leadership development within NHS Scotland and are in a privileged position to maximise current enthusiasm for medical leadership within the NHS.

Summary of Results: Fellows have interacted within their organisations to help guide strategy & policy development within leadership training, education of doctors and the medical working patterns as well as profiling the medical workforce across NHS Scotland.

Discussion and Conclusions: While much of the project work remains underway, the fellowship is in the process of developing further with increased recruitment and further development of programmes such as Paired Learning. The fellowship has been a valuable additional year to all the doctors involved and will continue to develop the value of medical and clinical leadership in the future of the NHS.

Take-home messages: Every medical professional demonstrates leadership; from small routine tasks to emergent situations. These skills can no longer be overlooked in today's medical education.
Uniting Medical School Specialty Societies at a National Level

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Background: Medical schools have a number of medical specialties societies. They organise events ranging from lectures and practical skills teaching to fundraising for a charity. Our aim as the DermSoc UK committee was to bring dermatology societies across the UK together, to share their ideas and provide inspiration.

Summary of Work: Two National DermSoc Days were organized for DermSoc members and interested medical students, kindly supported by the British Association of Dermatologists.

• The first event included career based talks, a talk by British Skin Foundation (BSF), and a discussion session looking at existing DermSoc endeavours, ideas for future events and introduced a national fundraising drive during BSF’s Skin Cancer Week.

• The second event was dedicated to dermatology related medical electives and research experience, concluded with a talk looking at the interaction of dermatology with other specialties.

Summary of Results: Feedback forms were collected, and responses analysed as Excellent, Good, Fairly Good, and Poor. 16 attended the first event, out of the 7 feedback forms, 6 rated the program as excellent, and 1 as good. For the second day, there were 46 attendees, and 34 feedback forms. 20 rated the program as excellent, and 14 as good.

Discussion and Conclusions: Students found both national days useful

- Idea sharing for societies was particularly commended
- National fundraising event raised £664.78 Students have found these national days to be very useful, and we have seen success with our national fundraising drive. Such events may be applied to similar medical specialty societies to encourage a central support for the growth of university societies and interest in niche specialties.

Take-home messages: National events to unite university societies can help maintain local activity and inspire new events.

A systematic review of the standards of clinical audit practice in UK hospitals

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Background: Participation in clinical audits is mandatory for healthcare professionals in the NHS to monitor and improve quality. Re-auditing is a key element for the completion of audit cycles and determines its success. This systematic review analysed published reports of clinical audit assessments in UK hospitals within the past two decades, to assess their overall quality and audit cycle completion rates, and to identify elements that facilitated the production of a successful audit.

Summary of Work: A literature search was conducted on EMBASE, MEDLINE, CINAHL, HMIC, TRIP database, Evidence Search, Cochrane Library and Google Scholar using keywords “audits”, “audit of audits”, “completion rate” and “hospitals” between 1994 and 2014. An additional handsearch was done for relevant papers. Only UK studies were included.

Summary of Results: Of the 1029 search results, 12 relevant publications were reviewed. 877 clinical audits were analysed. Only 147 audit projects (17%) have been completed with an audit cycle. 138 out of 283 audit projects (49%) led to implementation of action plan. Recommendations to improve clinical audit programmes include: audit training, careful project planning, involvement of the local audit department and senior staff, multidisciplinary approach, adequate handing over of projects, and periodical audit reviews.

Discussion and Conclusions: Low completion rate is a major concern for the effectiveness of clinical audits across NHS hospitals. Not only does this lead to valuable time and resources being wasted, the educational and core value of clinical audits are also jeopardised.

Take-home messages: Evaluation of local audit practice is highly recommended to improve audit monitoring and effectiveness.
Lessons learned: From conception to outcomes of the KELDAT-project

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Background: In October 2012 the Competence Centre for E-Learning, Didactics and Educational Research in Veterinary Medicine was established. Within a cooperation agreement among all German-speaking veterinary universities common goals were defined.

Summary of Work: To improve the quality of veterinary education a concept of objectives, subdivided to 7 work-packages, was developed. Some of the predefined key-aspects are: investigation of curricular alternatives, consultancy and trainings, cooperation in the field of teaching and quality management. Particularly the pooling of resources and expertise of the participating institutions was utilized to meet these objectives.

Summary of Results: Monthly online meetings of experts from all universities were arranged. Yearly didactic-symposia were conducted. A SWOT-analysis of curricular alternatives was performed. The Progress Test in Veterinary Medicine was implemented. More than 75 training-sessions of faculty staff with approximately 1500 participants were performed. Monthly online lectures with an average of 97.7 participants were held. 13 scientific studies in veterinary educational research were promoted. 3 prices for educational research were procured. The quality management system was successfully certified complying with the requirements of standard ISO 29990:2010.

Discussion and Conclusions: Different ways of working and teaching at the various faculties provide both enrichment and a hindering barrier. Even in spite of competition cooperation is possible. Although not all predefined milestones were met in their entirety, the overall achievements of the project are more than previously expected. The established network between veterinary universities leads by example and retains even after funding period.

Take-home messages: The foundation for further projects and incentives for contributions to educational research in veterinary medicine are set.

Developing sustainable medical education solutions in Africa through south-to-south collaborations

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Background: Stellenbosch University (SU) in South Africa, and University of Botswana (UB) forms part of the Medical Education Partnership Initiative (MEPI), a network of 13 medical schools in Africa funded by PEPFAR. MEPI aims to improve the retention of medical graduates in Africa through improving their quality and quantity, and has facilitated significant growth in medical education in Africa. South-to-south collaborations is a mechanism for building sustainability. This abstract describes the development of collaborations between SU and UB and shared best practices that enhances medical education in both countries.

Summary of Work: MEPI built on existing mutual agreements between the two universities, as well as a pre-existing project for the development of Family Medicine. Benchmarking visits were conducted to review existing collaborations and initiate new ones in areas supported through the MEPI program. Best practices, lessons learnt and established relationships between relevant departments were reviewed.

Summary of Results: The areas identified to enhance medical education in both universities included the implementation of eLearning to strengthen distributive learning; faculty development in teaching and learning; health systems research support for health care workers and supervisors in rural sites; and capacity building for medical education publication.

Discussion and Conclusions: The MEPI network has enabled the strengthening of south-to-south collaborations through the identification of locally relevant best practices using limited resources. Take-home messages: South-to-south collaborations are critical for providing locally relevant and sustainable solutions to enhance medical education. A summative evaluation of collaborative activities will need to be conducted to determine the impact of such collaborations.
The Educational Supervision Agreement in Wales: a survey of supervisors

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Background: To promote high quality postgraduate education and training and support the General Medical Council’s implementation plan, the Wales Deanery has developed the Educational Supervision Agreement (EdSA). This is a three-way agreement between Educational Supervisors, Local Education Providers and the Deanery which clarifies roles, responsibilities and expectations for all. To date 1237 Agreements have been signed.

Summary of Work: Evaluation of pan-Wales EdSA rollout (2013-2015) employed a mixed-methods approach: questionnaires (n=191); interviews (n=11) with Educational Supervisors, and discussion with key stakeholders (GMC, All-Wales Trainer Recognition Group, Clinical Directors). Questionnaire data are reported here. Numeric data were analysed in SPSS; open comments underwent thematic content analysis.

Summary of Results: Survey respondents represented 14% of signed Agreements to date. Respondents believed the Agreement: professionalises the Educational Supervisor role (85%, n=159 agree/strongly agree); increases the accountability of Educational Supervisors (69%; n=132) and Health Board (69%, n=131); provides leverage to negotiate SPA time (72%, n=142) and CPD activities (71%, n=131). Respondents were comfortable to demonstrate required CPD accreditation (69%, n=131). They wanted more feedback on their Educational Supervisor role (82%, n=153). Seventy per cent (n=133) wanted the Agreement to exercise greater control and sanction; one suggestion was that consultant colleagues should regularly cross-check “the accountability of programme directors and educational supervisors”.

Discussion and Conclusions: Our evidence suggests that respondents believe the EdSA agreement will professionalise and support their Educational Supervisor role. Respondents show an enthusiasm for the Agreement and the maintenance of high standards.

Take-home messages: The EdSA provides a way to support, recognise and professionalise the role.

Review of PSU Cases Resulting with a Dyslexia Assessment

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Background: The Wales Deanery quality assures postgraduate medical and dental training in Wales. The Performance Unit (PSU) was established in 2008 to provide remediation and support for doctors and dentists in training/residents with identified performance issues. Referrals are classified into five categories; performance, safety and quality, communication, maintaining trust and progression in training. From 2008 to 2015 PSU has supported 905 trainees with 77% of positive outcomes. Since 2013 there has been an increase of cases required Specific Learning Disability (SPLD) assessment and support.

Summary of Work: A review of overall cases of trainees/residents referred to PSU to explore support available with focus on cases that resulted in diagnosis of SPLD. The review scrutinises the referral criteria, the agreed interventions and the outcomes.

Summary of Results: The review has found an exponential growth in the number of trainees/residents from 0 in 2008 to 10 in 2014. A total of 18 trainees/residents whose training progress was affected by reasons related to SPLD were referred for Dyslexia assessment. Our data indicates that over 60% were able to address the issues identified and continue in training or achieve completion of training.

Discussion and Conclusions: Screening for SPLD enables the trainee to request adjustments for exam and increases their chances of passing. By proactively identifying and addressing the issues trainees are facing combined with the provision of individualised support for trainees identified with SPLD enables them to progress through exams, continue in programme, and attain a CCT.

Take-home messages: Appropriate assessments and adjustments for SPLD support positive progression in Postgraduate Medical and Dental Training.
Moving knowledge into action: A new knowledge translation initiative of AMEE

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Background: The production of systematic reviews (SRs) is a fundamental element of secondary research and forms the foundation for evidence informed medical practice and teaching. SRs on their own, are often not sufficient for informing decision-making and changing practice. Implementation strategies such as those used in healthcare that are aimed at moving evidence into clinical practice, are an essential component of the knowledge translation process. As the main goal of the BEME Collaboration is transmission from opinion based to evidence informed teaching we are responsible for all the phases of the knowledge translation process including application of identified evidence in practice, and last but not least, evaluation of implemented interventions and outcomes.

Summary of Work and Results: The initial phase of the project included identification of main themes of medical education and evaluation of BICCs’ areas of expertise. The current phase is focused on identifying the available resources, evaluating and agreeing on the quality of existing evidence, developing the framework for the medical education knowledge translation process, working out the documentation and quality assurance structure and finally on developing the first recommendation documents.

Discussion and Conclusions: The knowledge translation process has well-developed definitions and theoretical and practical foundations derived from EBM. Drawing from KT research in healthcare but recognising the unique attributes and contexts of medical education, our new initiative will follow the appropriate high quality standards for synthesizing research evidence and exploring ways to move HPE into teaching and assessment practices. The outcomes of this initiative will consider the specific characteristics of research in medical education, and the specific needs of the target group being medical education teachers and students.

Take-home messages: This is the first report on the new AMEE initiative focused on supporting medical teachers and trainers in the use of evidence to inform their day-to-day educational decisions.

Position and bearing of a systematic literature review assignment in the training program of physician assistants

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Background: In physician assistants (PA) training programs many efforts are made to acquire core competencies in medicine, including scholarly activities as represented in the CanMEDS. In the past few years designing and conducting original research of limited dimension directly connected with clinical experiences was a major component of scholarly activities. However, such an assignment by its complexity and laboriousness turned out be less feasible. We wonder about valuable alternatives.

Summary of Work: Experts in medical research, clinical medicine and/or medical education were interviewed individually and in groups on the goals, dimension and assessment of science education in PA programs.

Summary of Results: One agreed on the overriding significance of conducting evidence based medical practice by PAs. This requires a strong focus on skills in a systematic and appropriate search of literature as well as necessary skills to assess the value and applicability of literature. A systematic literature research might be an appropriate and feasible assessment of the Scholar role and could be a valuable alternative to conducting original research in PA programs.

Discussion and Conclusions: Systematic research of the medical literature on topics derived from theirs clinical experiences can be considered as an instrument to attain important educational goals with regard to a science based medical practice. At the same time it might be used as valuable tool for the assignment in the final part of PA programs.

Take-home messages: Offering scientific education which fits within an educational program and is connected with practice is an ongoing challenge. The performance of systematic literature research should have a central role in PA programs.
A qualitative pilot study to understand the impact of rising tuition fees for prospective medical students across Europe

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Background: The tuition rate of medical studies in Europe has been rapidly increasing for over a decade. Reasons for this include the recent financial crisis and subsequent changes to the government budget impacting directly on university funding. Tuition fee varies from as low as £300 per year in Bulgaria to more than £9,000 per year in the UK, with foreign international students paying fees more than five times higher than their local counterparts.

Summary of Work: Students from various European countries were interviewed and their responses analysed to supplement a literature search of peer-reviewed journal articles relating the subject matter.

Summary of Results: Studies suggest that students who currently pay higher fees feel that financial considerations would be a major influence on their choice of specialty compared to those who paid less a decade ago. Furthermore, students from low socioeconomic backgrounds are more likely to leave medical school in the first two years of enrollment in medical school owing to constraints.

Discussion and Conclusions: In countries such as the UK where tuition fees have sharply risen, students have migrated to different countries across Europe such as the Czech Republic. Growth in tuition fees has negatively affected students from poorer backgrounds which risks medicine becoming an elitist profession.

Take-home messages: We believe our research will provide further insight into the correlation of medical school tuition fee and higher education career pathways.