



23rd – 27th August 2025

Provisional Programme

Online

Programme times are in local Barcelona time.
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AMEE 2025 Online Conference Programme – Connect, Grow, Inspire!

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	To 31 May	From 1 June
Categories		
Full Individual	€415	€465
Concession ²	€245	€275
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AI Symposium ³	TBC	TBC
MEP Gateway	€60	€60

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- Those up to 5 years post-graduation as a doctor or other health professional. Those undertaking a full-time Masters or full-time PhD or other Doctoral programme and who do not receive a salary but who may receive grant funding.
- Those that have retired from their health profession career.
- Health professions students at undergraduate level or on graduate entry to medicine courses and continues until qualification as a doctor or other health professional.
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³May only be purchased with an AMEE online conference registration.

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AMEE 2025 CONFERENCE THEMES AND TRACKS

Conference Theme

The theme of AMEE 2025 is 'How are educators relevant to health?'

Educational Themes

- Admission and Selection
- AI/Technology Enhanced Learning
- Assessment
- Designing and Planning Learning
- Education and Management
- Equality, Diversity and Inclusivity
- Faculty Development
- Humanities
- Interprofessional and Team Learning
- Patient Safety
- Supporting Learners
- Sustainability and Global Health
- Teaching and Facilitating Learning
- The Scholarship of Teaching and Learning

Specialist Educational Tracks

- CPD
- Expanding Horizons: All Health Professions
- Surgery Education

Phases of Education

- CPD
- Generic
- Postgraduate
- Pre-Admission
- Undergraduate and Graduate

Introducing the AMEE 2025 Plenary Speakers



Professor Champion N. Nyoni

BSc (Hons) N, MSocSc Nursing, MHPE, PhD, World Health Organisation

Professor Champion Nyoni is a distinguished health professions education expert, currently serving at the World Health Organization's Regional Office for Africa in Brazzaville, Congo, where he leads the Health Workforce Education and Training portfolio.

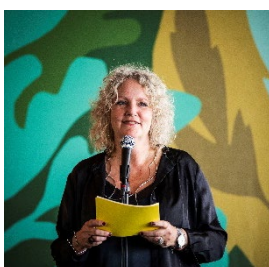
With extensive experience across multiple sub-Saharan African countries, Champion has been instrumental in advancing health professions education, particularly in low-resource settings. His work focuses on faculty development, curriculum innovation, and institutional capacity-building, championing reforms such as competency-based education to meet the region's health workforce needs.

Champion's research explores strategies to develop a competent, community-oriented health workforce that can address the pressing health challenges in underserved regions.

Currently, he spearheads a transformative initiative at the WHO Regional Office for Africa aimed at re-imagining health professions education across the African region.

His contributions have earned global recognition, including accolades from Sigma and the Southern African Association of Health Educationalists, where he was honored as a Distinguished Educator.

Champion's career reflects his unwavering commitment to shaping equitable and impactful health education systems that resonate with the needs of low-resource communities.



Professor Evelyn Finnema

University Medical Centre Groningen / University of Groningen

Professor Evelyn Finnema started 35 years ago as a bachelor nurse and health scientist. After graduating, she has worked in all fields of healthcare and in care, education, research and management in various positions.

Evelyn is a full professor of Nursing Science and Education at the University Medical Center Groningen/ University of Groningen. The research results contribute to the quality of life of frail persons and improve and support professional activities in this context.

Her research is characterised by interprofessional and cross-border thinking, connecting many partners in the field, and educational and knowledge institutions, and embedding research results in sustainable, practical solutions.

Her research themes are frailty research, person-centred care and professional development (education and training) of nurses. Currently, twenty PhD's are working on their PhD within the research program of Nursing Science and Education.

In addition to research, Evelyn pays much attention to education. She is a member of national and international committees aimed at improving healthcare and nursing education.

In addition, since May 2021, she has been the Governmental Chief Nursing Officer at the Ministry of Health, Welfare and Sport. In this role, she advises the ministers and represents the Netherlands in the WHO Euro-nursing hub.



Associate Professor Adam Rodman

Beth Israel Deaconess Medical Center / Harvard Medical School

Associate Professor Adam Rodman is a general internist and medical educator at Beth Israel Deaconess Medical Center and an assistant professor at Harvard Medical School.

He is the Director of AI Programs for the Carl J. Shapiro Center for Education and Research, and he leads the task force for integration of AI into the medical school curriculum. He is also an associate editor at NEJM AI.

His research focuses on medical education, clinical reasoning, integration of digital technologies, and human-computer interaction, especially with AI. His first book is entitled "Short Cuts: Medicine," and he is the host of the American College of Physicians podcast Bedside Rounds.

Adam completed his residency in internal medicine at Oregon Health and Science University in Portland, OR, and his fellowship in global health at Beth Israel Deaconess Medical Center while practicing in Molepolole, Botswana. He lives in Boston with his wife and two young sons.

AMEE 2025 Live Streamed Symposia Sessions

2A – When It hits the Fan: Moral, Ethical and Legal issues of AI in HPE

Raquel Correia, Ken Masters, Rakesh Patel, Eric Gantwerker, James Thomas

The widespread availability of Generative AI (GenAI) technologies triggered by the release of Chat-GPT on 30th November 2022 heralded in a new era of transformative affordances and capabilities for humans. With almost instant access to information, knowledge and augmented intelligence, the impact of AI on all sectors of society has been significant, particularly healthcare and Healthcare Professions Education (HPE). The unintended consequences of AI are gradually becoming apparent in these contexts, and are causing significant concern for learners and educators alike. ‘Fan-hitting’ moments describe situations when things go wrong and snowball beyond control.

This symposium moves the conversation beyond simple moral, ethical or legal dilemmas specific to AI, to examine the real and perceived human costs associated with AI ‘fan-hitting’ moments in healthcare and HPE contexts. Against this backdrop, moral issues related to rights and freedoms across individuals and institutions will be differentiated, and their impact on the well-being of both will be described. Ethical issues related to bias, discrimination and privacy will be openly discussed, inviting perspectives across various institutional and industry divides. Legal issues will be debated, focusing on notions of ownership, responsibility and accountability when things go wrong.

This is an AMEE TEL Committee initiative.

There is little discussion and debate about the management of ‘fan-hitting’ moments associated with AI, despite the significant reputational risk and damage that results when things go wrong. The symposium will blend both general and specific principles with practical examples and the experience of presenters managing such issues in a HPE context. The symposium will enable those new to GenAI, but also those responsible for delivering or designing curricula across the continuum of HPE, to make sense these challenges in their own roles.

This will be a large group plenary with audience interaction through polling software, and live Q&A. The topic will be introduced by Raquel, and each speaker will present on an aspect of AI, within the context of ethical, moral and legal frameworks. Issues will be primarily those raised through recent developments in AI, and predicted for the future. Illustrative examples will be used, so that audience members can draw on these to apply to their own contexts. Following these presentations, all speakers will form a panel to take Questions and Comments from the audience.

* Fan-hitting moments in GenAI aren't just technical failures – they have real human costs in healthcare and medical education that need to be understood and addressed

* When AI ‘hits the fan’ in healthcare education, the impacts cascade across moral, ethical, and legal domains – requiring a systematic approach to crisis management and

resolution

* Learning from AI 'fan-hitting' moments can strengthen institutional resilience and inform better governance structures in healthcare education

Theme: AI/Technology Enhanced Learning

Phase of Education: Generic

2B – Transferability in Medical Education: lens of cultural anthropology

Sayaka Oikawa, Hiroshi Nishigori, Ming-Jung Ho, Linda Snell

The concept of transferability in medical education addresses the growing need to equip medical professionals with knowledge and skills that transcend traditional disciplinary boundaries. In a rapidly evolving healthcare environment, learning from other fields is not only advantageous but essential for deepening the insights about medical education.

This “transfer” approach fosters a more holistic understanding of medical education and enhances the ability of medical educators to innovate within their teaching methodologies.

This symposium will, first, explore the importance of cultural contexts in faculty development program, and concept of transferability in medical education, with a focus on how inquiry-guided reflection by cultural anthropology lecturers which enhances cross-specialty learning of medical educators in various settings. Second, the importance of learning transferable skills such as leadership, communication, learner-understanding, and teamwork from teaching practices of non-medical fields will also be discussed. Third, this symposium will address the advantages of collaboration between medical education and cultural anthropology. Finally, we will discuss key considerations when conducting faculty development across different cultural contexts. These are critical for navigating the complexities of medical education and improving collaborative teaching.

The format will include presentations by a diverse panel of experts who have successfully integrated transferable skills into their medical education practices. Each panelist will share their experiences and strategies for applying transferable learning to their teaching. Following the presentations, participants will engage in a Q&A session to explore these ideas further and discuss practical applications in their own educational contexts.

Take-home messages:

1. Learning from other fields deepens the insight and effectiveness of medical educators.
2. Transferable skills from other disciplines can enhance medical teaching and improve patient care.
3. Transferable approaches can provide innovative solutions to challenges in medical education.

By the end of this session, participants will have a broader understanding of the value of transferability in medical education and practical ideas for incorporating collaborative session into their own faculty development program.

Theme: Faculty Development

Phase of Education: CPD

4A – Health for all: Inequities related to Racial and Gender Mainstreaming: How can Educators make a difference?

Mahwish Arooj, Vishna Devi V Nadarajah, Taz Goddard-Fuller, Lubna Ansari Baig, Gabrielle Finn

The Sustainable Development Goals provide the global health community a strategic chance to advocate for human rights, promote gender equality, and attain health for all. The health sector's failure to expedite progress on health outcomes is significantly effected by gender inequalities, rigid gender norms and a lack of understanding of specific health seeking and risk taking behaviors. WHO, UNICEF, WFME and others have extensively promoted gender mainstreaming; however, it is still largely unaddressed.

This symposium will critically explore the value of education as a powerful tool to address gender and racial disparities in healthcare, focusing on gaps between current state and future needs. The participants will get insights on the global gender and racial disparities in health professions education, healthcare practice, and leadership. The participants will be sensitized that by incorporating contextualized gender- and race-sensitive topics in the curriculum, health outcomes can improve. The best evidence models of health care training and practice will be suggested for better health outcomes for all genders, races and marginalized populations. Curriculum models with contemporary strategies will be suggested to create an all-inclusive culture of education and healthcare practice. The discussion will focus on how educators, through their roles in curriculum development, teaching, assessments, and leadership training for health professionals, can help create more equitable healthcare environments.

The symposium will feature five keynote presentations followed by a moderated discussion. Each speaker will have 12 minutes to present, leaving 30 minutes for an interactive Q&A session, ensuring that key themes are explored in depth. The topics of the talk will be: -Global overview of gender and racial disparities in health professions education and healthcare -Influence of Gender and racial disparities on health outcomes -Inclusion of gender and racial sensitive topics in HPE curriculum -Promoting Gender equality through Educator training -Mainstreaming all genders and races in the health system for better health care.

Incorporating gender and racial inclusivity into health professions education is essential for reducing healthcare disparities and improving patient outcomes. There is a need for extensive advocacy for gender mainstreaming.

Theme: Equality, Diversity and Inclusivity

Phase of Education: CPD

4B – Rethinking the definition of scholarly impact in health professions education

Lauren Maggio, Laura Roberts, Rachel Ellaway, Erik Driessen, Mary Beth DeVilbiss, Bridget O'Brien

In health professions education (HPE), publishing journal articles brings forward new ideas and evidence, and plays a major role in hiring, funding, and promotion decisions for authors. Given the important role that journals and their articles have, ways of measuring their quality and value to the field are critical. Authors and promotion and tenure (P&T) committees globally rely on metrics, including citations, h-index, the journal impact factor (JIF), and Altmetrics, each of which has limitations and specific use cases. For instance, this year marks the 50th anniversary of the JIF, which was developed not to measure journal quality, but to inform librarians' purchasing decisions. Over-reliance on the JIF and related metrics, such as those named above, has been shown to disadvantage women, early career researchers, and scholars from underrepresented racial and ethnic groups and may contribute to irresponsible research practices (e.g., gift authorship, salami slicing). Thus, this symposium will unpack currently available metrics and collaboratively rethink what scholarly quality and value mean for our community. The time is now to move past a narrow focus on limited, imperfect metrics towards embracing a more holistic understanding of the reach, influence, and contribution of HPE scholarship. By doing so, we can foster a more inclusive vision of academic success—one that elevates critical advancements and ensures that important voices in the field are recognized, both in the literature and in P&T decisions.

Promotion and tenure relies heavily on journal rankings and impact metrics for career decisions, yet current metrics are flawed and capture a limited range of impact. New metrics are needed to support more equitable career advancement.

The panel will present on the strengths and weaknesses of various measures and concepts of scholarly impact. We will facilitate a dynamic discussion among the panelists and audience on how we can redefine scholarly impact in the HPE community. Polls and small-group discussion opportunities will be available during the symposium.

Citation metrics are a major force in measuring scholarly impact, but are flawed, often misunderstood, and carry outsized influence.

It is time for the HPE community to collectively re-envision scholarly impact.

Theme: The Scholarship of Teaching and Learning

Phase of Education: Generic

5A – Career choices: how to ease recruitment in unloved specialties?

Milena Abbiati, Jennifer Cleland, Gerhard Grents, Lawrence Grierson, Sophie Park

The unbalanced distribution of medical staff is identified by the Global Health Workforce Alliance as the major public health challenge of the 21st century. The WHO estimates a global shortage of 2.8 million physicians, with severe deficiencies especially in low and middle-income countries (LMIC). The unequitable distribution of physicians worldwide is further exacerbated by the migration of physicians from LMICs to high-income countries (HIC). This large-scale migration has numerous economic and health consequences which include increased mortality associated with inadequate physician supply in LMICs. While LMICs countries are experiencing the greatest difficulties in providing the quantity and quality of doctors required to meet societal needs, issues are also experienced by high-income countries particularly in terms of attracting medical students and doctors to under-served areas and less popular medical specialties.

The maldistribution of the physician workforce disproportionately affects underserved specialties and regions. The consequences on access and quality of care are considerable. In this symposium, speakers will illustrate the situation in different countries and discuss what is being done (or not done) to meet the workforce planning challenge of providing adequate numbers of doctors, in the right specialties, to fulfil the needs of currently underserved regions.

This symposium involves five contributors from different backgrounds and countries, each giving a short presentation about key problems and potential solutions summarized below. – Overview of ratios, specialties and underserved regions; – Individual and contextual factors that influence career decision-making process; – What's currently being implemented to boost recruitment in rural areas, underserved communities as well as in Family Medicine. Participants will be asked to actively participate through polling and discussion where they can share their experiences.

Our symposium shares a range of approaches from different countries to address medical workforce issues. We highlight commonalities and opportunities for collaborative learning and problem-solving. AMEE participants are invited to use relevant discussion of problems and potential solutions in their diverse settings.

Theme: Sustainability and Global Health

Phase of Education: Generic

5B – Learning interprofessional collaboration during clinical supervision in the increasingly complex clinical practice

Maarten van der Ven, Maria Louise Gamborg, Dienneke van asselt

With the aging population and the increasing complexity of healthcare needs, effective interprofessional collaboration among various healthcare professionals is essential to care for multimorbid older adults. Learning interprofessional collaborative skills requires dedicated training during postgraduate programs.

Much postgraduate training occurs in the workplace, where clinical supervision dialogues between supervisor and learner play an important role in facilitating professional development and consolidating knowledge. Prior research shows that these dialogues can focus on either 'closure': providing answers and reassurance, to ensure efficient diagnosis and treatment, or 'discovery': fostering knowledge acquisition or collective reflection. This symposium will provide theoretical insight into learning interprofessional collaboration during clinical supervision. Participants will reflect on their current supervision practice and receive practical tips to enhance their skills for facilitating interprofessional collaboration during workplace dialogues between learners and supervisors.

Supervisors are known to play an important role in workplace learning, but research shows that they feel underprepared to facilitate learning interprofessional collaboration during clinical supervision. Further, research on interprofessional learning often focus on the learners' perspective, warranting a need to address this issue from an integrated supervisor and learner perspective. This symposium will provide concrete tools and knowledge to equip supervisors to provide such learning experiences.

1. Introduction and short reflective task (10 minutes): We will introduce the concept of clinical supervision and ask participants to reflect and discuss their supervising strategies.
2. Three rounds of presentations, interluded by 10-minute group discussions (60 minutes). The presentation will be on the three themes: a. The increasing complexity of healthcare for frail older adults b. The increasing importance of interprofessional collaboration and learning interprofessional collaboration in the workplace. c. How to facilitate learning during clinical supervision
3. Closing and questions (20 minutes): The symposium ends with practical tips to take to work to enhance interprofessional workplace learning and open up for questions.

- Learners and supervisors may experience working and learning as two different processes, which may obstruct learning during clinical supervision.
- Learners may experience a productive struggle during workplace learning, which may pose an uneasy feeling
- Adjustments in language use and context may facilitate deliberate learning.
- Interprofessional and Team Learning

Theme: Postgraduate

6A – Artificial intelligence and health professional identity formation: contemplating transformation

Kimberly Lomis, Linda Snell, Jamiu Busari, Martin Pusic

Artificial intelligence (AI) is disrupting practices of health care delivery and health professions education. Successful incorporation of AI for the benefit of patients and communities globally requires health professionals trained to adeptly and critically apply AI tools. We argue that this necessitates a re-balancing of elements of a health professional's identity.

It is essential that educators are informed about the promise and perils of AI to actively guide the professional identity formation (PIF) of health professions learners facing a rapidly evolving practice environment.

Each section: 10-minute presentation, 5-minute audience discussion Digital app to capture participant input throughout

1. A Framework for Professional Identity Formation (Snell) Multiple factors are involved in the process of socialization in medicine, and norms of practice change over time as medicine and society evolves. Audience activity: What aspects of professional identity must we preserve?
2. Artificial Intelligence in Health Care and the Master Adaptive Learner (Pusic) Successful integration of AI requires that health care professionals gain new competencies and adopt a developmental orientation, optimizing the power of collective intelligence. Audience activity: What elements of professional identity must shift to support the effective use of AI, and how might approaches to PIF need to evolve?
3. Precision Education (Lomis) Desired innovations such as competency-based education could be accelerated by artificial intelligence, but technology alone will not create the necessary learning environment. Deliberately developmental organizations will optimize the use of AI for care and for training. Audience activity: What organizational culture change is necessary to support PIF in the context of artificial intelligence?
4. Diversity of Professional Identities (Busari) Effective health care systems benefit from a diversity of perspectives. While AI offers potential to elevate a broader range of constructive professional identities, there is a risk of inequities at the micro, meso and macro levels. Audience activity: How might the context of AI-supported practice drive a more inclusive view of professional identity formation? How can we mitigate increasing digital divides?
5. Group discussion, to include faculty development strategies (30 minutes)

AI will alter the professional identity formation of health professionals. Educators must actively engage to foster desired outcomes.

Theme: AI/Technology Enhanced Learning

Phase of Education: Generic

6B – Disentangling the concept and practice of faculty development across cultures and health professions: implications for scholarship and practice

Karen Leslie, Diana Dolmans, Yvonne Steinert, Ardi Findyartini

Over the last few decades, faculty development in health professions education (HPE) has grown significantly in terms of its scope and practice. Early initiatives that focussed largely on enhancing faculty members' teaching activities have extended to include educational leadership and scholarship. Also evident is a growing awareness of the potential for faculty development practice to move beyond the individual educator to contribute to change at an organisational level. This growth has, however, not occurred at the same pace and manner across the world, influencing how faculty development is described and defined in different contexts, resulting in a wide range of understandings of its focus and intent.

In an era of international growth, globalisation and collaborative partnerships, differences in understandings can lead to confusion in the field, hampering international collaborations and making synthesis and analysis difficult. In response, members of the AMEE FACDEV committee embarked on a scoping review to provide a picture of how faculty development is conceptualised in the literature across cultures and diverse health professions. The intention was not to achieve definitional unanimity, but to untangle faculty development as a concept and practice, towards a richer understanding.

We will briefly present key findings from the review, including the range of definitions and content areas, diverse approaches and formats, and inconsistent use of theory or conceptual frameworks. We will also discuss what these findings mean for how the faculty development community understands itself and how it should respond to the ever-changing landscape within which it functions. Implications for theory-building and research, as well as future directions, will be addressed. These short inputs will be interspersed with audience engagement, including an online poll, and framed around specific prompts.

Those responsible for faculty development are encouraged to demonstrate flexibility in light of ongoing change to create new ways to practice as the context demands. The future of faculty development in HPE warrants an approach to program design, implementation and outcomes evaluation informed by the context as well as the use of theories or conceptual models that inform faculty development interventions and research.

Theme: Faculty Development

Phase of Education: Generic

7A – Planning, implementing and evaluating surgical educational innovation and change for the benefit of healthcare and health

Karen Baatjes, Aimee Gardner, Kristine Hagelsteen, Shu-Che Liao, Kenneth Walker, Jennifer Cleland

Surgical education and training can be defined as a complex intervention; that is, an intervention involving several components that cannot be separated and where change in one part of the system has ramifications through the system (e.g., Campbell et al. 2007; Cleland et al., 2016). These components include the context and organisation of the wider healthcare and education systems, how training is structured, and characteristics of the trainer and trainee/resident, as well as the wider socio-cultural-historical contexts of surgical education.

Approaches for planning and evaluating surgical education change and innovation must acknowledge this multi-layer ecosystem, ask appropriate research questions, and adopt rigorous methodological approaches that examine not just educational outcomes but the process of educational experiences. Such evaluations must be designed with benefit to health in mind and disseminated in a way which leads to change on the ground.

The presenters will critically consider the complex/unruly practice of surgical education research in several contexts, using diverse examples of planning, implementing and evaluating change in surgical education from South Africa, Sweden, Taiwan, the USA and the UK.

This topic is important because surgical research must be grounded in need and designed to lead to change at systems and individual levels, to ensure such research is focused on benefit from systems, learners and patients.

Each presenter will speak for 8–10 minutes. The moderator (Jennifer Cleland) will introduce the session, summarise the main messages from the five short presentations, and moderate questions from the audience.

Participants will take home that surgical educators have a vital role in leading research which has benefit at a systems and individual level. They will learn new approaches and new ways of thinking about surgical education research, and engaging key stakeholders in surgical education research.

Theme: The Scholarship of Teaching and Learning

Phase of Education: Postgraduate

7B – CBME Insights gained from National level initiatives across the world

Lisa Howley, Glen Bandiera, Chien-Yu Jonathan Chen, Lorena Cifuentes, Damon Dagnone, Fedde Scheele

Competency-Based Medical Education (CBME) has gained significant momentum globally as an approach to training healthcare professionals who meet the evolving demands of patient care. While each country has its unique challenges and strategies in implementing CBME, sharing cross-national insights can foster a deeper understanding of best practices and potential pitfalls.

This session will explore the CBME frameworks of five countries at different stages of CBME development—Canada, United States, Taiwan, Chile, Netherlands—highlighting key lessons learned, successful implementation strategies, and areas for continued growth. Participants will be introduced to the first modern CBME framework – CanMEDS, developed by the Royal College of Physicians and Surgeons of Canada, and serving as the basis for specialty education in Canada for over 25 years. Building from this work, four additional countries will share their journey towards advancing CBME at the national level, including lessons for leading transformative change across their member medical schools. Quality of health care and health outcomes are global issues that beget an international discussion on the appeal of unifying competency frameworks. Such frameworks, of which CanMEDS is one example, underpin the trust and responsibility that society places with physicians; contributing as they do to health equity and positive health outcomes. Competency-Based Medical Education (CBME) has gained significant momentum globally as an approach to training healthcare professionals to meet the evolving demands of patient care. While each country has its unique challenges and strategies in implementing CBME, sharing cross-national insights can foster a deeper understanding of best practices and potential pitfalls. This session will explore the experiences in five countries at different stages of developing locally relevant frameworks and implementing them through CBME strategies. Participants will gain a comparative understanding of how CBME functions in different healthcare and educational contexts, with a focus on enhancing both learner outcomes and patient care.

We will summarize the history of CanMEDS and make the link to contemporary CBME models. (10 minutes). We will then present five different perspectives on CBME implementation and leading change from five countries at different stages of actualization. Perspectives will include decision points around framework adaptation or development, implementation challenges and projections about emerging tensions that need to be reconciled in various contexts (5x8 = 40 minutes). We will then engage in an interactive Panel Discussion and Comparative Analysis (30 minutes), which will include probing questions on adaptation and implementation interspersed with audience questions and comments. We will conclude by providing summary comments to stimulate some parting thoughts for attendees (10 minutes).

1. Competency frameworks are critical in enabling physicians to meet evolving societal expectations.
2. Despite disparate views on expectations of future doctors, clear directions are emerging

that can inform future frameworks.

3. Despite contextual differences, national-level CBME initiatives are possible across the world, which will generate ideas for the future direction of CBME and how countries can collaborate globally to meet 21st century healthcare challenges.

Theme: Designing and Planning Learning (including Curriculum)

Phase of Education: Undergraduate and Graduate

8A – The Educator’s Role in Advancing Remediation Systems and Practices: Where are we going?

Jean Klig, Adina Kalet, James Kwan, Minal Singh, Jennifer Cleland, Calvin Chou

All health professions learners struggle to some extent during the learning process (Klig et al., 2024). However, identifying and addressing a range of learning struggles throughout healthcare education remains fraught with challenges (Ellaway et al., 2018). As successful remediation practices and systems evolve, we must continue to identify what works, correct what does not, and reduce the stigma of remediation as a perceived ‘penalty box’ (Bennion et al., 2018; Chou et al., 2019). Ultimately, educators will manage these numerous tasks and foster the meaningful change essential for progress in remediation. Join us in reviewing current successes and challenges in remediation practice and to envision where we are headed in the next era of competency-based medical education (CBME).

Remediation systems and practices continue to evolve to address all levels of struggles in learning. While remediation is a cornerstone of healthcare education that reflects core values and dedication to training competent clinicians, it is broadly under-resourced and often misaligned with schools’ curricula. (Bennion et al., 2018) Concerns about the scope and cost of expanding remediation continue to hamper efforts to build responsive systems that ultimately could reduce existing costs and barriers. The future of CBME depends on our ability to innovate and improve remediation more expeditiously.

The session will have three, 30-minute segments. 1. “Remediation – what works and what does not”: will include a brief interactive presentation (with embedded polls), audience discussions in pairs/trios emphasizing structured input to the large group, and Q&A. 2. “Examples of progress across the remediation landscape”: will include a brief interactive and thought-provoking presentation, audience discussions in pairs/trios emphasizing structured input to the large group, and Q&A. 3. “Next steps for future progress”: including brief expert perspectives and panel discussion with audience input, leading to final closing comments and Q&A.

1. Remediation should be a greater priority in healthcare education because it is essential to effective implementation of CBME.
2. Educators have a vital role in advocating for and leading change in remediation.
3. With systems change we can overcome biased perceptions and debunk myths about the effectiveness and cost of remediation.

Theme: Supporting Learners

Phase of Education: Undergraduate & Graduate

8B – Kick Starting Patient Safety Teaching: Practical tips generated from successful experiences, from curriculum integration to the challenges of assessment

Dimitri Parra, Robin Newton, Douglas Paull, Kate Owen, Ashokka Balakrishnan, Nicole Mollenkopf

The WHO Global Patient Safety (PS) report 2024 described that more than one in ten patients experience harm in medical care settings, leading to millions of deaths and substantial economic costs. The burden of unsafe care disproportionately affects low/middle-income countries, and vulnerable populations, where most patient harm and associated deaths occur. PS education is limited, with poor integration into healthcare education curricula and with limited educators. The WHO PS curriculum attempts to decrease this gap.

PS education is gaining interest, becoming an important task for curricular integration at different levels of healthcare education. In this symposium, educators from around the world, will describe their experience with starting patient safety teaching in multilevel education. Lessons learned, tips for success, practical ways on overcoming barriers and future development ideas will be discussed. Examples described and analyzed will include interprofessional online education; medication safety training, workshops using experiential learning with real patient stories; and the use of Morbidity and Mortality audits/ PRL as a teaching tool. Special attention will be given to assessment of PS training outcomes as this represents a challenge in PS teaching. Methods described will be based on the best evidence available.

Reducing patient harm is a worldwide healthcare goal, therefore effective and successful integration of this topic to education curricula is crucial. During this symposium, participants will observe and reflect on experiences that will provide them with a framework to develop their own local PS teaching. This symposium will also generate ideas on how to assess the skills, competencies and entrusted professional activities involved in PS teaching.

10–15 minutes presentations from each panelist followed by 20–30 minutes of open discussion and case analysis. The participants will be encouraged to share their successful and unsuccessful stories and to ask questions that may help them to implement ideas.

PS teaching is a key priority in healthcare education, with different ways to deliver it. Successful teaching experiences can provide practical ideas that can be replicated, especially in resource limited environment, facilitating the development of a framework for curricular integration and competency assessment.

Theme: Patient Safety

Phase of Education: Undergraduate & Graduate

9A – Global approaches to continuing professional development: Quality, standards and culture for lifelong learning in health

Jim Campbell, Janusz Janczukowicz, Sharon Mitchell, Harumi Gomi, Renée Stalmeijer

This symposium will explore approaches to drive quality improvement in continuing professional development (CPD) for the global health and care workforce. Providing CPD interventions that meet learner needs and drive positive change in practice remains a significant challenge. Not all CPD has the desired impact intended. Where CPD is mandated, it is regulated in very different ways, varying by occupation, by region, by country – and for many occupations, access to or requirements for CPD are minimal and often absent. This session will focus on the actions required to elevate the quality of CPD, ensuring it is applicable to both regulated and unregulated occupations. High-quality CPD is essential for the sustainability of an effective healthcare workforce.

The session will offer an opportunity to explore how standards for CPD can guide education providers based on common principles. Speakers from different regions will present examples of CPD systems, and consider the quality of education and practice. The WHO Pan-European Leadership Academy, which serves as a platform to foster leadership development and promote quality in lifelong learning for health and care workers will be presented. Finally, this symposium will address strategies necessary to cultivate a culture for lifelong learning within healthcare.

The symposium will delve into how collaboration among education providers, regulatory organisations and learners can enhance the quality and impact of CPD.

Interactive presentation 1: Differences in CPD systems in different countries, reflecting on quality (example from low middle income country and high income country) Interactive task: Mentimeter voting on systems in different countries Interactive presentation 2: Driving quality education with internationally accepted standards to recognise learning achievement in health Interactive task: Q&A session with audience Interactive presentation 3: WHO Pan-European Leadership Academy developing leadership skills to drive quality and innovation in CPD Interactive task: Q&A session with audience Interactive presentation 4: Fostering a quality culture for lifelong learning in health Interactive task: Meet and Share with participants

Health and care workers must have access to quality CPD, relevant to their practice, to enable them to maintain competence, adapt to evolving practice demands, and provide quality patient care.

Theme: Education and Management

Phase of Education: CPD

9B – Professionalism and Ubuntu – vernacular reframing of social contract for a new generation of health professionals

Lionel Green Thompson, Mantoa Mokhachane, Ann George, Tasha Wyatt, Ayelet Kuper

Professionalism exists when society permits a group of educated people to self-regulate, thereby establishing a social contract that implies levels of accountability for health professionals. Communities do not have the vocabulary to exact social accountability from doctors, resulting in doctors holding significant power in asymmetrical relationships in which communities present as vulnerable. Ubuntu has the potential to hold the multiple axes of the doctor-patient relationship. Mokhachane et al (2022a), reporting on the professional identity formation of medical students in the aftermath of student protests in 2016, argued that Ubuntu is an essential manifestation of professionalism, especially when it is grounded in the calabash metaphor holding the vernacular expressions of letsema (shared purpose), lebollo (an ungendered initiation process), mbokodo (the solid bedrock) and uqhira (the isiXhosa embodiment of a doctor. Professionalism is a global graduate attribute which may be contested depending on one's vantage point.

Current notions of professionalism, however, need to be transformed through vernacular expressions. We argue that role modelling by higher education teachers is critical in building ethical professional graduates for the 21st century.

The understanding of professionalism is an integral part of health professional practice and a key part of the education process

A multimedia presentation of vernacular African voices with dialogue provided by presenters. The engagement will use different techniques of active learning. Each speaker will address aspects of professionalism: Mantoa Mokhachane – What does professionalism sound like in local African languages? Ann George – Professionalism as faculty development; Ayelet Kuper – Contemporary issues within the dominant Global North professionalism discourse; Tasha Wyatt – The current professionalism discourse – is there a problem; Lionel Green-Thompson – Reconstructing professionalism for global citizenship

Professionalism may have different expressions in different contexts some of which may positively influence global definitions

Theme: Equality, Diversity and Inclusivity

Phase of Education: Undergraduate & Graduate

9E – Are we training clinicians for the future? (in Spanish)

Juan Argüelles, Jesús Millán Núñez-Cortés, Marcos Nuñez Cuervo, Madalena Patricio.

To develop the skills of a (good) doctor for the future, we will need the student to achieve learning results in accordance with changes in the scientific, technological and social environment. We must prepare him to "do better things" and "make things better." In any case, regardless of the traditional knowledge, skills and values of the doctor, our mission as educators will be to introduce the necessary changes for the profile of the future doctor that society needs, including curricular changes

The Symposium should be considered as an aid to all educators and teachers interested in the training of future physicians, especially those involved in teaching in the clinical environment. The Symposium is organized to discuss and reflect on the transformations affecting medical education today. Transformations that affect the profile of the teaching staff, the competency domains, the educational environment (including the digital one), and the students (including the internationalization of programs and the educational process). Clinical teaching-learning is the cornerstone of medical education, with the participation of three main agents: the teacher, the student and the patient. All the changes that occur in these protagonists and in the clinical environment must be considered for the preparation of the future doctor. The Symposium offers the opportunity to reflect and share on a new framework for medical education in undergraduate studies.

This Symposium will be in Spanish. It will cover three topics in the form of an interactive session with the attendees with a common denominator: "Thinking about the doctor of the future". The introduction (Prof. J Millan, 5') will be followed successively by Topic 1: "The doctor that the world of today needs" (Prof. Patricio, 15'), Topic 2: "Changes in the academic triad: professor, student and patient" (Prof. Nuñez Cuervo, 15'), and Topic 3: "International dimension of medical education" (Prof. Argüelles, 15'). These presentations will be followed by an interactive Q&A and debate with the audience, in order to draw practical conclusions (30'). Finally, closing remarks (Prof. J Millan, 10') will include the proposals for a consensus statement of Spanish scientific societies (Medical Education and Internal Medicine).

- 1.- It is necessary to identify new skills according to the needs of the doctor in the future, related with new scientific and new domains of knowledge
- 2.- In the clinical field this is more important due to the need to consider the changes derived from the digital environment that will condition technology and data management (big data and AI).
- 3.- However, the doctor-patient relationship will continue to be the "workhorse" in which students must train.
- 4.- The training of medical students benefits from the experiences acquired through the international dimension of medical education
- 5.- All these aspects determine the role of the professor of medicine, who must also have certain academic skills.

Theme: Designing and Planning Learning (including curriculum)

10A – Glocalization in Action: Exploring Opportunities for Advancing Innovations for Locally Relevant Education Practices Informed by Global Insights

Yu-Che Chang, Annette Burgess, Eliot Rees, Lynn Monrouxe, Ming-Jung Ho

In medical education, there has been an assumption that core aspects of medical competence originating in the West are universal, fostering the idea that we can establish “global standards” for curricula, assessment and accreditation. Scholarly research and educator experience have recognized both positive and negative consequences associated with globalizing health professions education (HPE). There is the realization that for Western practices to be of wider utility, their implementation requires “glocalization”: acknowledging the importance of (non-Western) local systems, norms and traditions to meet the needs of learners and educators working in diverse socio-cultural-historical contexts.

This symposium will present practical, evidence-based examples of how practices from other contexts are implemented across the continuum of HPE and the associated outcomes. Educators across the world will share their experiences of glocalizing and adapting (1) curricula, (2) accreditation practices, (3) educational content, (4) teaching methodologies, and (5) assessment practices to align with their specific healthcare and learning contexts.

Enhancing health professions educators' understanding of the glocalization process can improve our ability to develop curricula, content, teaching methods, and assessments that align with the context, including our students' needs and the available learning resources. Recognizing this, and broadening the discussion to encourage the use of non-Western practices and values to enhance global HPE, is crucial to the development of our field.

The symposium comprises three sessions: 1. Introduction of Key Concepts (10 minutes): Principles for glocalization in health professions education will be highlighted. 2. Case Presentation (50 minutes): A panel will share case studies on glocalization, highlighting best practices for setting adaptation objectives, knowledge translation, integration with local educational philosophies, policy alignment, and evaluating the impact on educational outcomes and the long-term viability of adaptations 3. Interactive Q&A (30 minutes): The panel will address questions from attendees.

The initiatives aimed at glocalization, spearheaded by educators and scholars in collaboration with feedback from learners, can significantly contribute to the effective implementation of education reforms in health professions education worldwide. Attendees will enhance their understanding of how to critically evaluate and modify curricula, teaching methodologies, and interventions developed in different contexts to align with local health contexts and educational requirements.

Theme: Teaching and Facilitating learning

Phase of Education: Generic

10B – The Missing Middle: Realities, Challenges and Dreams of Early Career Educators and Researchers

Ugo Caramori, Azhar Adam Nadkar, Dina-Ruth Lulua, Jessica Sommer, Maria Al Rachid, Eliana Amaral, Eleonora Leopardi

In the community of Health Professions Education (HPE), early career educators and researchers often find themselves in the 'missing middle'. In this space we are required to self-negotiate the gap between joining this new community and becoming an established community educator or researcher. This perspective is experienced across regions globally. Five diverse early career educators and researchers have come together to voice the perspectives of being in 'the gap' outlining their journey, aspirations and experiences. As scientific advances shape the way healthcare is taught and delivered, understanding the transitory journey of the early career educator and researcher is critical. This perspective and experience has a direct impact on the scholarship and advances we see in teaching and healthcare around the world.

The relevance of early educators and researchers to health extends far beyond the classroom—they are foundational to the future of healthcare. Yet, this group is often expected to navigate the complexities of professional growth with limited guidance, resources, or support. This symposium addresses key barriers faced by this group, such as the scarcity of mentorship, challenges in professional identity formation, and the pervasive issue of burnout—particularly as many balance demanding clinical responsibilities with their educational roles. Moreover, fostering an environment rooted in equality, diversity, and inclusivity (EDI), and a strong sense of belonging is critical to ensuring that all early career educators and researchers, regardless of their intersectionality, have access to equitable opportunities for growth and leadership.

This symposium will use a mix of globally diverse storytelling, interactive discussions, and case studies that highlight the unique challenges and successes faced by early career educators and researchers. Further it will present a reflective vision for a contemporary academic progression. Finally, the team will discuss and propose ways to strengthen and promote what we currently define as intentionally "nurturing" leadership: how today's leaders can contribute to those of the future.

Engaged and motivated early career educators and researchers are essential to shaping the future of healthcare through their teaching, research, and inspiration. Supporting the growth, resilience, and impact of this group is critical to advancing HPE.

Theme: Equality, Diversity and Inclusivity

Phase of Education: Generic

10E – Synergies between feedback, debriefing and coaching: translating expertise between simulation education and workplace-based learning

Walter Eppich, Elizabeth Molloy, Michaela Kolbe, Gabriel Reedy, Priya Jain, Rune Dall Jensen

Simulation educators, clinical supervisors, and health professional trainees engage in various conversations with ‘learning’ and ‘performance improvement’ as explicit goals.

These include ‘feedback’, ‘debriefing’, and ‘coaching’. Despite the vital role of these learning conversations, both educators and trainees may not engage effectively.

Facilitated feedback, healthcare debriefing in simulation or clinical settings, and coaching conversations—while distinct genres—share cross-cutting principles, such as psychological safety, a growth mindset, and effective questions to promote reflection. Whereas feedback and debriefing may still often focus on past concrete experiential learning encounters and emphasise error and improvement, coaching conversations are ideally strength-based, explore solutions, and provoke concrete future action. Importantly, educators can integrate these genres of learning conversations, for example, with the R2C2 model of facilitated performance feedback.

This symposium builds on a successful 2024 AMEE symposium on simulation and coaching for remediation and has three main aims: (a) to explore synergies among these genres of learning conversations, (b) to identify opportunities to enhance educational practice in both simulation and clinical workplaces, and (c) to inspire future research in this important space.

Although feedback in clinical education and healthcare simulation debriefing have long been topics of research and faculty development, both clinical debriefing and coaching practices are expanding. The discourses around these genres of learning conversation remain blurred in some areas. We will seek to clarify these potentially blurred conceptualisations and help attendees identify opportunities to hone their approach to their learning conversations in simulation and workplace settings.

This symposium brings together diverse perspectives on learning conversations in both simulation and workplace learning. Each panellist will offer a 10-min presentation on: (a) feedback, (b) simulation debriefing, (c) clinical debriefing, and (d) coaching. Session moderators will then facilitate a discussion with panellists in response to audience questions. Short video vignettes will demonstrate key principles.

* Feedback, debriefing, and coaching are distinct practices yet with important areas of overlap. * Expert educators may both selectively use and also integrate elements from each genre for a given learning conversation depending on setting, objective, and learning need. * Future research should further conceptualise and clarify relevant variables for a given conversational context.

Theme: Supporting Learners

Phase of Education: Generic

SATURDAY 23 AUGUST

0830–1600 AI Symposium (Details coming soon)



SUNDAY 25 AUGUST

0700–0730 AMEE 2025 Online Orientation Session

0830–1600 AI Symposium (Details coming soon)

1800–1930 Plenary (Live Stream)

Welcome to AMEE 2025

Ayelet Kuper (AMEE President), Anne Lloyd (CEO), Local Representatives

1A – Plenary – the Ronald Harden Plenary

Entertainment

1930–2115 Informal Networking Session

MONDAY 25 AUGUST

0900–1030 – Session 2: Simultaneous Sessions (Live Stream)

Symposia 2A

When It hits the Fan: Moral, Ethical and Legal issues of AI in HPE

Raquel Correia, Ken Masters, Rakesh Patel, Eric Gantwerker, James Thomas

Symposia 2B

Transferability in Medical Education: lens of cultural anthropology

Sayaka Oikawa, Hiroshi Nishigori, Ming-Jung Ho, Linda Snell

Research Papers 2E

0915–1015 – Session 2: Short Communication Sessions (Online)

Short Communications Online 1

Short Communications Online 2

1100–1230 – Session 3: Plenary (Live Stream)

3A – Plenary – To be Confirmed

ASPIRE-to-Excellence Awards

1400–1530 – Session 4: Simultaneous Sessions (Live Stream)

Symposia 4A

Health for all: Inequities related to Racial and Gender Mainstreaming: How can Educators make a difference?

Mahwish Arooj, Vishna Devi V Nadarajah, Taz Goddard-Fuller, Lubna Ansari Baig, Gabrielle Finne

Symposia 4B

Rethinking the definition of scholarly impact in health professions education

Lauren Maggio, Laura Roberts, Rachel Ellaway, Erik Driessen, Mary Beth DeVilbiss, Bridget O'Brien

Research Papers 4E

1415–1515 –Short Communication Sessions (Online)

Short Communications Online 3

Short Communications Online 4

1600–1730 – Session 5: Simultaneous Sessions (Live Stream)

Symposia 5A

Career choices: how to ease recruitment in unloved specialties?

Milena Abbiati, Jennifer Cleland, Gerhard Grents, Lawrence Grierson, Sophie Park

Symposia 5B

Learning interprofessional collaboration during clinical supervision in the increasingly complex clinical practice

Maarten van der Ven, Maria Louise Gamborg, Dienneke van Asselt

AMEE Fringe 5E

1615–1715 –Short Communication Sessions (Online)

Short Communications Online 5

Short Communications Online 6

TUESDAY 26 AUGUST

0900–1030 – Session 6: Simultaneous Sessions (Live Stream)

Symposia 6A

Artificial intelligence and health professional identity formation: contemplating transformation

Kimberly Lomis, Linda Snell, Jamiu Busari, Martin Pusic

Symposia 6B

Disentangling the concept and practice of faculty development across cultures and health professions: implications for scholarship and practice

Susan van Schalkwyk, Karen Leslie, Diana Dolmans, Yvonne Steinert, Ardi Findyartini

Research Papers 6E

0915–1015 –Short Communication Sessions (Online)

Short Communications Online 7

Short Communications Online 8

1100–1230 – Session 7: Simultaneous Sessions (Live Stream)

Symposia 7A

Planning, implementing and evaluating surgical educational innovation and change for the benefit of healthcare and health

Karen Baatjes, Aimee Gardner, Kristine Hagelsteen, Shu-Che Liao, Kennether Walker, Jennifer Cleland

Symposia 7B

From the 'What' of CanMEDS to the 'How' of CBME: Insights gained from National level initiatives across the world

Glen Bandiera, Damon Dagnone, Lorena Cifuentes, Fedde Scheele, Lisa Howley, Chien-Yu Jonathan Chen

Research Papers 7E

1115–1215 –Short Communication Sessions (Online)

Short Communications Online 9

Short Communications Online 10

1400–1530 – Session 8: Simultaneous Sessions (Live Stream)

Symposia 8A

The Educator's Role in Advancing Remediation Systems and Practices: Where are we going?

Jean Klig, Adina Kalet, James Kwan, Minal Singh, Jennifer Cleland, Calvin Chou

Symposia 8B

Kick Starting Patient Safety Teaching: Practical tips generated from successful experiences, from curriculum integration to the challenges of assessment

Dimitri Parra, Robin Newton, Douglas Paull, Kate Owen, Ashokka Balakrishnan, Nicole Mollenkopf

Research Papers 8E

1415–1515 –Short Communication Sessions (Online)

Short Communications Online 11

Short Communications Online 12

1600–1730 – Session 9: Simultaneous Sessions (Live Stream)

Symposia 9A

Global approaches to continuing professional development: Quality, standards and culture for lifelong learning in health

Jim Campbell, Janusz Janczukowicz, Sharon Mitchell, Harumi Gomi, Renee Stalmeijer

Symposia 9B

Professionalism and Ubuntu – vernacular reframing of social contract for a new generation of health professionals

Lionel Green-Thompson, Mantoa Mokhachane, Ann George, Tasha Wyatt, Ayelet Kuper

Symposia 9E (delivered in Spanish)

Are we training clinicians for the future?

Juan Arguelles, Jesus Millan Nunez-Cortes, Marcos Nunez Cuervo, Madalena Patricio

1615–1715 –Short Communication Sessions (Online)

Short Communications Online 13

Short Communications Online 14

WEDNESDAY 27 AUGUST

0900–1030 – Session 10: Simultaneous Sessions (Live Stream)

Symposia 10A

Glocalization in Action: Exploring Opportunities for Advancing Innovations for Locally Relevant Education Practices Informed by Global Insights

Yu-Che Chang, Annette Burgess, Eliot Rees, Jennifer Cleland, Lynn Monrouxe, Ming-Jung Ho

Symposia 10B

The Missing Middle: Realities, Challenges and Dreams of Early Career Educators and Researchers

Ugo Caramori, Azhar Adam Nadkar, Dina-Ruth Lulua, Jessica Sommer, Marian Al Rachid, Eliana Amaral, Eleonora Leopardi

Symposia 10E

Synergies between feedback, debriefing and coaching: translating expertise between simulation education and workplace-based learning

Walter Eppich, Elizabeth Molloy, Michaela Kolbe, Gabriell Reedy, Priya Jain, Rune Dall Jensen

0915–1015 – Short Communication Sessions (Online)

Short Communications Online 17

Short Communications Online 18

1100–1230 – Session 11: Plenary (Live Stream)

11A – Plenary – To be Confirmed

Conference Prizes

Close of AMEE 2025 and Introduction to AMEE 2026