AMEE 2025 SYMPOSIA

The AMEE 2025 Symposia schedule is currently being finalised. Further details will be released soon.

- The Clinical Relevance of Visual Thinking Strategies in Health Professions Education
- Transferability in Medical Education: lens of cultural anthropology
- Disentangling the concept and practice of faculty development across cultures and health professions: implications for scholarship and practice
- Learning interprofessional collaboration during clinical supervision in the increasingly complex clinical practice
- The Missing Middle: Realities, Challenges and Dreams of Early Career Educators and Researchers
- CPD in the workplace: how to connect formal and informal learning?
- Glocalization in Action: Exploring Opportunities for Advancing Innovations for Locally Relevant Education Practices Informed by Global Insights
- Kick Starting Patient Safety Teaching: Practical tips generated from successful experiences, from curriculum integration to the challenges of assessment.
- Planning, implementing and evaluating surgical educational innovation and change for the benefit of healthcare and health
- Synergies between feedback, debriefing and coaching: translating expertise between simulation education and workplace-based learning
- Career choices: how to ease recruitment in unloved specialties?
- Educational Outreach for Healthcare Workforce Development
- Global approaches to continuing professional development: Quality, standards and culture for lifelong learning in health
- Health for all: Inequities related to Racial and Gender Mainstreaming: How can Educators make a difference?
- Rethinking the definition of scholarly impact in health professions education
- Innovative Medical Education Strategies in Response to Forced Migration and Global Health Crises
- Leveraging Errors to Enhance Learning in Health Professions Education
- The Educator's Role in Advancing Remediation Systems and Practices: Where are we going?
- Professionalism and Ubuntu – vernacular reframing of social contract for a new generation of health professionals
- Artificial intelligence and health professional identity formation: contemplating transformation.
- When It hits the Fan: Moral, Ethical and Legal issues of AI in HPE

The Clinical Relevance of Visual Thinking Strategies in Health Professions Education

Margaret Chisolm, Johns Hopkins University, Baltimore, USA
Tzu-Hung Liu, Tzu Chi University, Hualien, Taiwan
Hui-Ching Weng, National Cheng Kung University, Tainan City, Taiwan
Razan Baabdullah, King Abdulaziz University, Jeddah, Saudi Arabia
Gauri Agarwal, University of Miami Miller School of Medicine, Miami, USA

Background: The World Health Organization; US National Academies of Science, Engineering, and Medicine; and the Association of American Medical Colleges have recognized the importance of the arts and humanities (A&H) in health professions education (HPE). Visual Thinking Strategies (VTS) is an A&H-based pedagogical method with over 20 years of evidence supporting its use in HPE.

Why the Symposium Topic is Important: Innovative approaches are needed to help health professions learners and practitioners develop difficult-to-master skills and attitudes that are crucial to clinically excellent care and the health and well-being of patients. The evidence for VTS' impact on clinically relevant attributes continues to grow, but these research findings are not well known among health professions educators. Given the expanding role of Artificial Intelligence (AI) in healthcare, it is essential to disseminate the latest knowledge in the field of VTS in HPE, including both research findings and expert opinions.

Format: Five 9-minute presentations: Excerpts from a filmed VTS discussion among Johns Hopkins University (USA) medical students, followed by a brief presentation summarizing the published evidence base on VTS in HPE Presentation on impact of VTS on empathy, critical thinking, and other clinically relevant attributes among medical students from Tzu Chi University (Taiwan) Presentation on VTS' impact on facial analysis, empathetic communication, metacognition, and illness narratives from King Abdulaziz University (Saudi Arabia) Presentation on eye tracking during VTS of medical students from National Cheng Kung University (Taiwan) Presentation on the use of VTS as a method to reflect on the impact of AI and other technology on humanistic skills and patient care among medical students from the University of Miami (USA) Followed by 45-min Q&A

Take-home Messages: VTS can be synergistically combined with other art and humanities teaching methods to create comprehensive, multifaceted approaches to clinical skills development. The clinically relevant impacts of VTS include enhanced observation and communication skills, tolerance for ambiguity, and empathy. Research is now expanding to consider the mechanisms by which VTS causes these changes and how VTS is unique from other interventions such as AI-based methods.

Theme: Humanities
Phase of Education: Generic

Transferability in Medical Education: lens of cultural anthropology

Sayaka Oikawa, Department of Innovative and Digitalized Medical Education, Akita University Graduate School of Medicine, Akita, Japan
Hiroshi Nishigori, Center for Medical Education, Graduate School of Medicine, Nagoya University, Nagoya, Japan
Ming-Jung Ho, Department of Family Medicine, Georgetown University Medical Center, Washington, D.C, USA
Linda Snell, Medicine and Health Sciences Education, McGill University, Montreal, Canada

Background: 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.

Why the Symposium Topic is Important: 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.

Format: 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

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

Karen Leslie, University of Toronto, Toronto, Canada
Diana Dolmans, Department of Educational Development and Research and SHE, FHML, Maastricht University, Maastricht, Netherlands
Yvonne Steinert, Institute of Health Sciences Education, Faculty of Medicine and Health Sciences McGill University, Montreal, Canada
Ardi Findyartini, Department of Medical Education & Medical Education Center - Indonesia Medical Education and Research Institute (IMERI) Faculty of Medicine Universitas Indonesia, Jakarta, Indonesia

Background: 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.

Why the Symposium Topic is Important: 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.

Format: 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.

Take-home Messages: 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

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

Maarten van der Ven, Radboudumc, Nijmegen, Netherlands
Maria Louise Gamborg, MidtSim, Aarhus, Denmark
Dieneke van asselt, Radboudumc, Nijmegen, Netherlands

Background: 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.

Why the Symposium Topic is Important: 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.

Format: 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.

Take-home Messages: 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.

Theme: Interprofessional and Team Learning
Phase of Education: Postgraduate

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

Ugo Caramori, School of Medical Sciences, University of Campinas (UNICAMP), Campinas, Brazil
Azhar Adam Nadkar, Faculty of Medicine and Health Sciences, Stellenbosch University, Cape Town, South Africa
Dina-Ruth Lulua, Faculty of Health Sciences, University of Capetown (UCT), Cape Town, South Africa
Jessica Sommer, College of Intensive Care Medicine, Perth, Australia
Maria Al Rachid, Faculté de Médecine, Université Saint Joseph De Beyrouth, Beirut, Lebanon
Eliana Amaral, School of Medical Sciences, University of Campinas (UNICAMP), Campinas, Brazil
Eleonora Leopardi, School of Medicine and Public Health, University of Newcastle, Australia

Background: 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.

Why the Symposium Topic is Important: 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.

Format: 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.

Take-home Messages: 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.

CPD in the workplace: how to connect formal and informal learning?

Sharon Mitchell, University of Bern Institute for Medical Education (IML), Bern, Switzerland
Helena Prior Filipe, Hospital of Egas Moniz Egas Moniz Center for Interdisciplinary Research (CiiEM), Lisbon, Portugal
Louise Allen, The University of Melbourne, Melbourne, Australia
Sofia Valanci, Royal College of Physicians and Surgeons of Canada, Ottawa, Canada
Esther de Groot, UMC Utrecht, Utrecht, Netherlands

Background: The purpose of continuing professional development (CPD) is to ensure that busy healthcare professionals maintain and update core competencies, so patients receive the best care. To achieve this, CPD must facilitate both formal (i.e., courses and conferences designed to update on the latest advances), and informal (i.e., less structured, experiential activities that occur in real-world contexts where professionals can reflect, adapt and refine their practice)1 learning to ensure the development of knowledge and skills, good work practices, and ultimately improved practice performance.2-4 Yet, the boundary between formal and informal learning is not clearly defined,5 and we lack understandings of how to integrate formal and informal learning to strengthen learning transfer. This symposium will explore how we can better integrate informal and formal learning to ultimately improve practice performance and patient care.

Why the Symposium Topic is Important: Launching discussions to better understand how formal and informal learning intersect is essential to optimising and improving CPD strategies that can effectively translate knowledge and skills into real-world clinical practice.

Format: The symposium is intended for all people interested in CPD. It will cover four key topics and each topic includes interactivity such as Menti. Introduction and overview (5 minutes). Topic 1: Formal vs. Informal Learning (10 minutes+5 minutes Q&A) - this topic will establish what constitutes formal and informal learning in the context of CPD. Topic 2: Integrating Formal and Informal Approaches (10 minutes+5 minutes Q&A) - this topic will explore how to foster a workplace culture that seamlessly integrates both learning approaches. Topic 3: Recognising Informal Learning (10 minutes+5 minutes Q&A) - this topic will focus on how to assess and recognise informal learning as CPD. Topic 4: Future Directions (10 minutes+5 minutes Q&A) - this topic will investigate how CPD can evolve to better connect formal and informal learning. Discussion with audience and close (25 minutes).

Take-home Messages: Effective CPD requires the integration of both formal and informal learning to ensure healthcare professionals continually update their knowledge and skills in practice settings. By intentionally connecting these learning approaches, CPD planning, design, and implementation can facilitate the transition to improved practice performance and enhanced patient care.

Theme: Designing and Planning Learning (including Curriculum)
Phase of Education: CPD

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

Yu-Che Chang, Chang Gung Medical Education Research Centre (CG-MERC), Chang Gung Memorial Hospital, Linkou, Taoyuan, Taiwan
Annette Burgess, The University of Sydney School of Medicine, New South Wales, Australia
Eliot Rees, Primary Care Education Group, City St George's School of Health and Medical Sciences, University of London, London, UK
Lynn Monrouxe, The University of Sydney School of Health Sciences, New South Wales, Australia
Ming-Jung Ho, Center for Innovation and Leadership in Education (CENTILE), Georgetown University Medical Center, Washington DC, USA

Background: 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.

Why the Symposium Topic is Important: 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.

Format: 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.

Take-home Messages: 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

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

Dimitri Parra, The Hospital for Sick Children, Toronto, Canada
Robin Newton, Accreditation Council for Graduate Medical Education, Chicago, USA
Douglas Paull, Accreditation Council for Graduate Medical Education, Chicago, USA
Kate Owen, Warwick Medical School, Warwick, UK
Ashokka Balakrishnan, National University Hospital, Singapore, Singapore
Nicole Mollenkopf, Johns Hopkins School of Nursing, Baltimore, USA

Background: 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.

Why the Symposium Topic is Important: 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.

Format: 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.

Take-home Messages: 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

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

Karen Baatjes, Stellenbosch University, Capetown, South Africa
Aimee Gardner, Association for Surgical Education, Los Angelese, USA
Kristine Hagelsteen, Lund University, Lund, Sweden
Shu-Che Liao, Chang Gung Memorial Hospital, Keeling, Taiwan
Kennether Walker, Royal College of Surgeons, Edinburgh, UK
Jennifer Cleland, Nanyang Technological University, Singapore, Singapore

Background: 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, Tiawan, the USA and the UK.

Why the Symposium Topic is Important: 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.

Format: 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.

Take-home Messages: 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

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

Walter Eppich, University of Melbourne, Melbourne, Australia
Elizabeth Molloy, University of Melbourne, Melbourne, Australia
Gabriel Reedy, King's College London, London, UK
Rune Dall Jensen, Aarhus University, Aarhus, Denmark
Cristina Diaz-Navarro, Cardiff University, Cardiff, UK
Marie Morris, Royal College of Surgeons Ireland, Ireland, UK
Raj Kainth, Kings College London, London, UK

Background: 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.

Why the Symposium Topic is Important: 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.

Format: This symposium brings together diverse perspectives on learning conversations in both simulation and workplace learning. Each panellist with 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.

Take-home Messages: * 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

Career choices: how to ease recruitment in unloved specialties?

Milena Abbiati, Faculty of Medicine, University of Geneva, Geneva, Switzerland
Jennifer Cleland, Lee Kong Chian School of Medicine, Singapore, Singapore
Gerhard Grents, Faculty of Medicine, University of Tortu, Tortu, Estonia
Lawrence Grierson, Faculty of Health Sciences, McMaster University, Hamilton, Canada
Sophie Park, University of Oxford, Oxford, UK

Background: 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.

Why the Symposium Topic is Important: 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 fulfill the needs of currently underserved regions.

Format: 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.

Take-home Messages: 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

Educational Outreach for Healthcare Workforce Development

Bei Zhang, Robert Larner MD, College of Medicine at the University of Vermont, Burlington, USA

Jonathan Wisco, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine, Boston, USA

Pamela Gibson, Robert Larner MD, College of Medicine at the University of Vermont, Burlington, USA

Nana Sartania, School of Medicine, Dentistry and Nursing, University of Glasgow, UK

Leila Amiri, Robert Larner MD, College of Medicine at the University of Vermont, Burlington, USA

Zhi Xiong Chen, Yong Loo Lin School of Medicine, National University of Singapore, Singapore, Singapore

Background: The workforce shortage is the major obstacle to delivering effective health services and overburdens healthcare education. It is essential to scale up the development and training of the healthcare workforce long before students reach health professional schools.

Why the Symposium Topic is Important: Expanding the workforce requires healthcare education to reach out to the early education community, engaging students, teachers, and parents to inspire career interests.

Successful implementation of a community outreach education program takes deliberate strategy, thoughtful planning, intelligent resource allocation, and the combined efforts of all stakeholders, with justice, equity, diversity, and inclusion at the core. A community of practice promotes diversity among healthcare professionals to meet the needs of multicultural societies.

This symposium will highlight successful outreach programs across North America and Asia, including:

 * ASPBP's efforts and Anatomy Academy, a nationwide program where medical students teach anatomy and nutrition to 5th and 6th graders.

 * A local outreach program centered on clinical laboratory diagnostics for K-12 students is expanding across Vermont and Upstate New York.

 * The Biotechnology Research Incubator for Teachers (BRITE) program trains middle and high school teachers in Texas.

 * Holistic admissions practices and pathways to increase diversity.

 * Equity-focused outreach to address hereditary meritocracy in Singapore.

The panelists, from diverse geographic and cultural backgrounds worldwide, will share their unique perspectives, best practices, and strategies to adapt programs to local contexts. Combining outreach programs with pathway programs leading to medical and allied health school admissions ensures greater efficiency and impact.

Format: The session will start with an overview of the healthcare workforce shortage, followed by five panelists sharing insights and their unique outreach programs, which are of different scales and focused on multiple healthcare professions, interprofessional collaboration, and equity-driven practice. The session will conclude with an interactive Q&A.

Take-home Messages: Addressing the healthcare workforce shortage requires a proactive approach, starting with early educational outreach to inspire students long before professional schools. Effective outreach programs involve the collaboration of health professionals, scientists, and educators, with clear goals and a focus on equity, diversity, and inclusion. Combining outreach with career pathways and inclusive admissions enhances impact, increases workforce diversity, and ensures sustainable efforts to meet growing healthcare demands.

Theme: Admission and Selection
Phase of Education: Pre Admission

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

Jim Campbell, Health Workforce Department, World Health Organization, Geneva, Switzerland
Janusz Janczukowicz, Medical University of Lodz, Lodz, Poland
Sharon Mitchell, Health Workforce Department, World Health Organization, Geneva, Switzerland
Harumi Gomi, International University of Health and Welfare School of Medicine, Otawara, Japan
Renée Stalmeijer, School of Health Professions Education (SHE), University of Maastricht, Maastricht, Netherlands

Background: 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.
Why the Symposium Topic is Important: The symposium will delve into how collaboration among education providers, regulatory organisations and learners can enhance the quality and impact of CPD.
Format: 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
Take-home Messages: 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

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

Mahwish Arooj, University of Lahore, Lahore, Pakistan
Vishna Devi V Nadarajah, Newcastle University Medicine Malaysia, Kuala Lumpur, Malaysia
Taz Goddard-Fuller, University of Liverpool School of Medicine, Liverpool, UK
Lubna Ansari Baig, Equator University of Science and Technology, Masaka, Uganda
Gabrielle Finn, The University of Manchester, Manchester, UK

Background: 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.

Why the Symposium Topic is Important: 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.

Format: 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.

Take-home Messages: 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

Rethinking the definition of scholarly impact in health professions education

Lauren Maggio, University of Illinois at Chicago, Illinois, USA
Laura Roberts, Stanford University, Stanford, USA
Rachel Ellaway, University of Calgary, Calgary, Canada
Erik Driessen, Maastricht University, Maastricht, Netherlands
Mary Beth DeVilbiss, Association of American Medical Colleges, Washington, USA
Bridget O'Brien, University of California, San Francisco, San Francisco, USA

Background: 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.

Why the Symposium Topic is Important: 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.

Format: 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.

Take-home Messages: 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

Innovative Medical Education Strategies in Response to Forced Migration and Global Health Crises

Süleyman Yıldız, Marmara University, Istanbul, Turkey
Paul de Roos, Uppsala University, Uppsala, Sweden
Sena Ece Ilgın, Marmara University, Istanbul, Turkey
Emine Senkal, St George's University Hospital, London, UK

Background: In the contemporary landscape, the phenomenon of forced migration has intensified, driven by factors such as armed conflict, environmental degradation, and economic turmoil. As a result, health systems across the globe face the urgent challenge of adapting to the needs of increasingly diverse populations. To effectively address this growing complexity, it is essential to fundamentally restructure medical education, ensuring that future physicians are equipped with the necessary skills to provide comprehensive care for displaced communities. This transformative approach requires a thoughtful re-evaluation and reorganization of medical training programs, which is crucial for fostering a healthcare workforce capable of meeting the unique challenges posed by migration

Why the Symposium Topic is Important: In today's world, we are witnessing significant changes in our healthcare landscape due to global health crises and the realities of forced migration. As these challenges reshape our approach to health, it becomes increasingly essential for various stakeholders to collaborate and identify innovative solutions. This cooperation is crucial for equipping the next generation of medical professionals with the skills they need to succeed in environments characterized by high mobility and complex crisis situations. To truly forge a better future for healthcare, we must place greater focus on fostering discussions that inspire and engage all those involved in this vital mission.

Format: The symposium will start with an introduction on current health challenges related to migration because of global crises. Presenters will introduce three distinct topics to increase participants' attention and highlight the importance of incorporating crisis response and migration health into medical curricula. Real-life case examples will be discussed, alongside practical solutions, to ensure participants gain a clear understanding of new developments and strategies for integrating these changes into their educational frameworks.

Take-home Messages: In countries facing the challenges of significant migration from global crises like war, climate change, and economic instability, the key to a successful healthcare policy is an updated, adaptable, and responsive medical education curriculum. Embracing this journey begins with ensuring that educators grasp the vital importance of these innovative models and how to bring them to life.

Theme: Sustainability and Global Health
Phase of Education: Generic

Leveraging Errors to Enhance Learning in Health Professions Education

Leonardo Aliaga, Stanford University School of Medicine, Palo Alto, USA
Jennifer Klasen, University Digestive Healthcare Center, St. Claraspital and University Hospital Basel, Basel, Switzerland
Jimmy Beck, Seattle Children's Hospital, Seattle, USA
Naomi Steenhof, University of Toronto, Toronto, Canada

Background: The literature shows that errors offer valuable learning opportunities, but how can front-line clinician educators use them purposefully? Traditionally, errors are treated as unintended outcomes to learn from retrospectively. However, research on error-based learning shows that deliberately introduced errors can drive more profound understanding and improve skills transfer. The challenge for educators is creating the optimal amount of difficulty to trigger productive errors and knowing when, where, and for which learners this approach is most effective. This symposium will explore how to design learning experiences that purposefully and safely incorporate errors for optimal learning. We will review the evidence on error-based learning strategies and provide examples for incorporating these strategies in clinical and non-clinical learning environments.

Why the Symposium Topic is Important: Health professions education frequently emphasizes error avoidance, which may limit learners' ability to develop critical problem-solving skills in unpredictable clinical settings. By neglecting errors as learning tools, we miss a crucial opportunity to build adaptability and resilience in future clinicians. Educators must understand how to create optimal conditions for errors to occur in a productive way that improves conceptual knowledge and transfer to real-world practice. Without this shift in perspective, the full potential of error-based learning strategies remains untapped.

Format: 10min: (Warm-up) Storytelling about learning from error, introduce the theoretical framework and benefits of error-based learning, grounded in the psychology and HPE literature. 10min: (Reflection Activity) Polling and small group discussions will explore participants' current use of errors to improve learning. 30min: (Interactive Didactic) Describe practical applications in clinical and non-clinical settings using case-based examples. Differentiate between productive and unproductive errors, focusing on how supervisors can incorporate the optimal amount of difficulty. 20min: (Group activity) Participants will collaboratively discuss how they will apply error-based learning strategies in their contexts. We will provide a template to guide this discussion. 20min: (Wrap-up and Q&A) Discuss barriers to using failure as a pedagogical strategy, mitigation strategies, and actionable steps.

Take-home Messages: Deliberately using errors as learning tools can foster deeper understanding and skills transfer. However, to effectively apply error-based learning strategies, educators must create the optimal difficulty for a given learner to generate productive errors.

Theme: Designing and Planning Learning (including Curriculum)
Phase of Education: Generic

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

Jean Klig, Harvard Medical School, Boston, USA
Adina Kalet, Medical College of Wisconsin, Milwaukee, USA
James Kwan, Tan Tock Seng Hospital, Singapore, Singapore
Minal Singh, Edge Hill University School of Medicine, Lancashire, UK
Jennifer Cleland, Nanyang Technology University, Singapore, Singapore
Calvin Chou, University of California, San Francisco, San Francisco, USA

Background: 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).

Why the Symposium Topic is Important: 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.

Format: 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.

Take-home Messages: 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

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

Lionel Green Thompson, University of Cape Town, Cape Town, South Africa
Mantoa Mokhachane, University of the Witwatersrand, Johannesburg, South Africa
Ann George, University of the Witwatersrand, Johannesburg, South Africa
Tasha Wyatt, Uniformed Services University for the Health Sciences, Bethesda, USA
Ayelet Kuper, University of Toronto, Toronto, Canada

Background: 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.

Why the Symposium Topic is Important: The understanding of professionalism is an integral part of health professional practice and a key part of the education process

Format: 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

Take-home Messages: 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

Artificial intelligence and health professional identity formation: contemplating transformation.

Kimberly Lomis, American Medical Association, Chicago, USA
Linda Snell, McGill University, Montreal, Canada
Jamiu Busari, Maastricht University, Maastricht, Netherlands
Martin Pusic, American Board of Medical Specialties, Chicago, USA

Background: 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.

Why the Symposium Topic is Important: 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.

Format: 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)

Take-home Messages: AI will alter the professional identify formation of health professionals. Educators must actively engage to foster desired outcomes.

Theme: AI/Technology Enhanced Learning
Phase of Education: Generic

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

Raquel Correia, Université de Paris Cité, School of Medicine, Paris, France
Ken Masters, Sultan Qaboos University, Muscat, Oman
Rakesh Patel, Barts and The London Faculty of Medicine and Dentistry, Queen Mary University of London, London, UK
Eric Gantwerker, Department of Otolaryngology, Zucker School of Medicine at Hofstra/Northwell, New York, USA
James Thomas, Nottingham University, Nottingham, UK

Background: 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.

Why the Symposium Topic is Important: 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.

Format: 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.

Take-home Messages: * 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