

communication and leadership, which are instrumental in improving clinician confidence and patient outcomes. Future direction should look to include awareness and implementation of human factors within mainstream simulation to effectively replicate real time clinical scenarios & pressures.

Table 1-A40: 10 questions were devised to assess confidence relating to practical aspects of human factors in healthcare with regards to teamwork, communication, and leadership. Following paired data analysis, we found a statistically significant improvement in confidence in all areas investigated.

Question – On a scale of 1-10 rate your confidence in: -	Pre course	Post course	p value
Constructively managing others' negative emotions at work	6.1	7.8	<0.001
Requesting help from colleagues in other professions	8.0	8.6	<0.001
Communicating effectively with a colleague with whom you disagree	5.9	7.6	<0.001
Prioritizing when many things are happening at once	6.2	7.9	<0.001
Speaking up as part of a team to convey what you think is going on	6.2	8.2	<0.001
Involving colleagues in your decision-making process	7.4	8.3	<0.001
Dealing with uncertainty in your decision-making process	6.0	7.5	<0.001
Asking other team members for the information I need during a busy ward environment	6.8	8.0	<0.001
Recognizing when you should take on a leadership role	6.0	7.9	<0.001
Monitoring the 'big picture' during a complex clinical situation	5.8	7.7	<0.001
Anticipating what will happen next in clinical situations	5.7	7.6	<0.001
Working effectively with a new team in clinical situations	6.6	8.1	<0.001

Ethics statement: Authors confirm that all relevant ethical standards for research conduct and dissemination have been met. The submitting author confirms that relevant ethical approval was granted, if applicable.

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TECHNOLOGY

A41

IMPLEMENTATION OF VIRTUAL CLINICAL EXPERIENCES FOR MYANMAR MEDICAL STUDENTS: A PILOT ROLLOUT OF REMOTE-SYNCHRONOUS SIMULATION

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Background and aim: Severe disruptions have plagued Myanmar's undergraduate and postgraduate medical education – firstly with the Covid-19 pandemic and later with a military coup d'état in February 2021. In the wake of the current humanitarian and political crisis, many medical students partaking in civil disobedience have been driven underground for fear of retribution. Foregoing bedside teaching and crucial clinical learning opportunities in hospitals – for online education through teleconferencing and live broadcast via social media. To scale up these efforts the Global Health Education Group's (GHEG) novel XR platform was piloted to provide remote clinical experiences streamed to Myanmar students with the help of diaspora doctors and virtual patients in the UK [1].

Methods: The pilot held over a 4-day period in February comprised 4 Virtual Clinical Experience (VCE) sessions each covering two simulated patient scenarios related to the following disciplines: Medicine, Surgery, Obstetrics and Gynaecology, and Paediatrics. Each session had an introductory, consultation, and debrief phase that ran for 1.5 – 2 hours altogether. This was held on GHEG's newly developed Virtual CP platform [2], which enabled the students to view a live stream of the consultation with the patient-actor through the clinician's smart glasses and provided the opportunity for real-time interaction.

Results: The sessions were successfully delivered to 400 students from across 5 Myanmar Universities. The student's satisfaction was assessed using an anonymous feedback form that was disseminated; a total of 38 responses was obtained which was overwhelmingly positive. 76.3% of the respondents rated the session to be 'helpful' or 'extremely helpful' and 68.4% rated the session to be representative of a real clinical experience. On a scale out of 10, 57.8% of respondents rated the VCE platform a 6 and above on ease of use. Technical difficulties did arise affecting 68.4% of respondents, although free text feedback purported they were promptly addressed in subsequent sessions.

Conclusion: Synchronous remote learning through virtual clinical experiences can be used to address the dearth of clinical opportunities afforded to medical students in Myanmar.

Ethics statement: Authors confirm that all relevant ethical standards for research conduct and dissemination have been met. The submitting author confirms that relevant ethical approval was granted, if applicable.

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2. <https://www.gheg.org/virtual-clinical-experiences>

DESIGN

A42

A PALLIATIVE CARE SKILLS STUDY DAY IS AN EFFECTIVE WAY OF MEETING PALLIATIVE CARE REGISTRAR CURRICULUM DIRECT OBSERVATION OF PROCEDURAL SKILLS (DOPS) REQUIREMENTS

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