POSTER COMPETITION WINNERS

Novel use of biopsychosocial model to identify training deficits and target personal development

Dr James Wilson, North West Deanery

Dr James Wilson graduated from Manchester in 2006 and is currently an ST7 trainee in the North West Deanery. He has been teaching medical students since 2007 and completed a fellowship in medical education in 2010. Educational areas of interest include Human Patient Simulation and Human Factors. Clinical interests include regional anaesthesia, orthopaedics and obstetrics.

The survey presented explores the biopsychosocial model idea of Demand: Resource Evaluation Score (DRES) and Challenge: Threat responses. Two questions can predict performance in sport and aviation simulation – ‘How demanding do you expect the task to be?/how well resourced are you for the task?’

A survey of trainee anaesthetists in the NW found a correlation with responses to these questions and duration of training. DRES results could be used to identify training deficits or areas where trainee lack confidence (or competence) and inform personal development plans, placements and module choices.

In situ simulation: a smoother induction?

Dr Tom Mount, Central Manchester Foundation Trust

Dr Tom Mount graduated from the University of Manchester, and is currently an ST7 trainee in anaesthetics in the North West School. He has a special interest in teaching, and is on the Health Education NW Medical Education Fellowship scheme.

The presented work describes the novel use of ‘in situ’ simulation for trainees, which is an established part of the workplace induction process at Central Manchester. Qualitative assessment of the programme suggests it is a useful and effective means of reinforcing clinical and organisational knowledge.

Less-than-full-time (LTFT) matters: a national survey of LTFT training

Dr Emma Plunkett, Birmingham School of Anaesthesia

Dr Emma Plunkett is a final year SpR in the Birmingham School of Anaesthesia (BSA). She has also worked in Wessex, London and Melbourne, and has been working LTFT since 2009. Emma was lead LTFT trainee for the BSA from 2012-14 before being elected to the GAT committee in 2014 and she is currently Honorary Secretary. Her interests are obstetric anaesthesia, supporting fellow anaesthetists (especially those working LTFT) and developing Learning from Excellence, an initiative to appreciate and acknowledge good practice. Her presentation describes the AAGBI GAT LTFT network which has been set up to enable sharing of problems, ideas and resources for those working LTFT across the country.
POSTER COMPETITION ENTRIES

Dr J Wilson
Wigan, Wrightington and Leigh NHS Foundation Trust
Novel use of Biopsychosocial Model to Identify Training Deficits and Target Personal Development

Dr T Mount, Dr K MacLennan and Dr C Allen
Central Manchester Foundation Trust
In-situ simulation: a smoother induction?

Dr E Plunkett, Dr A Costello and Dr S C Gibb
Group of Anaesthetists in Training, Association of Anaesthetists of Great Britain and Ireland
Less-than-full-time (LTFT) Matters: a national survey of LTFT training

Dr R O’Byrne, Dr S A Michlig, Dr P Groom and Miss Y He
Mid Cheshire Hospitals NHS Trust and Aintree University Hospital
Matching trainees to training opportunities – an app to modernise clinical anaesthetic training

Dr K Inkpin and Dr I Crighton
Nottingham University Hospitals
Mentoring and Training: Supporting the Doctors of the future

Dr K Oglesby, Dr M Bell, Dr P Steed, Dr S Underwood, Dr S Tomkins, Dr B Gibbison and Dr N Wharton
Bristol Heart Institute, University Hospitals Bristol NHS Foundation Trust
Addressing training concerns using sequential simulation – The One Heart Model

Dr N S Jenkins, Dr D Bird, Dr M Fealey Dr C Hancock, Dr G Pugh, Dr K Beard, Dr J A Francis and Dr A Kennedy
Wales
Implementing a Quality Improvement Training Plan in Wales: Lessons from the first cohort

Dr L Young, Dr C Slorach and Dr I Lang
West of Scotland
ANPCC

Dr T Brunning, Dr M Davies, Dr C Scanlon and Dr J Kerr
Birmingham
Efficiency improvements in simulation training: Designing and implementing a portable obstetric anaesthesia course

Dr J De Bois and Dr P Bathke
KSS
Training in Teaching in Anaesthetic Trainees. A Departmental Survey

Dr N Jain and Dr T Beamont
Aintree University Hospital, Health Education North West (Mersey)
Buddying – is it beneficial?

Dr L Giesen, Dr D Janssen and Dr M Thomas
North Bristol NHS Trust
Transfer Training for Junior Clinical Fellows on Intensive Care

Dr E Mason
Darent Valley Hospital
Improvement in knowledge and confidence of FY1 doctors in vital patient safety topics following an anaesthetic trainee led teaching programme

Dr A Duffen and Dr M Rooms
The Royal Marsden Hospital
Show me the evidence: Do Logbook apps improve evidence of clinical experience?

Dr J M Wong, Dr R Cordery and Dr S Giannaris
Department of Perioperative Medicine, Barts Heart Centre, London
Clinical Supervision in Cardiothoracic Anaesthesia – Pilot Study from the Trainees’ Perspective

Dr D Lloyd, Dr C Woo, Dr D Christmas, Ms M Ashcroft, Ms J Gomez Mateo, Mr M Gold and Dr N Stranix
Imperial Healthcare NHS Trust, Charing Cross Hospital, London
Multidisciplinary clinical simulation of difficult airway management as a training tool for novice anaesthetists and anaesthetic support staff: laying foundations for enhancing non-technical skills

Dr M Cheresheva and Dr V Cowie
Croydon University Hospital
Assessing the assessor: How trainee’s feedback is improving performance of trainers

Dr C Thomas, Dr S Knight, Dr L Bishop, Dr C Fairbairns, Dr B Parker, Dr S Jinks and Dr J Pipe
Yorkshire and the Humber Deanery
The ‘Tufty club’: post-FRCA teaching in West Yorkshire

Dr B Griffiths, Dr H Jeffeson, Dr S McDouall and Dr P Duggleby
Royal Berkshire Hospital
The mutual benefits of a trainee led management module

Dr M Latif, Dr A Smith, Dr M Okoisor and Dr S Snyders
Buckinghamshire NHS Trust
Developing the obstetric component of basic level training in Anaesthesia: Regional Obstetric Simulation Training for Anaesthetists (ROSTA)
Dr A Skorko and Dr S Sanders  
*University Hospitals Bristol NHS Foundation Trust*
Outcomes of a short training intervention to improve familiarity with Sengstaken-Blakemore Tubes

Dr C Allen and Dr T Mount  
*Central Manchester University Hospitals NHS Foundation Trust*
Trainees’ perceptions of the impact of increased out of hours consultant presence on training

Dr L Hobbs, Dr N Goetze, Dr M P Simpson and Dr A Kambli  
*East and North Herfordshire NHS Trust*
Does a 1 in 7 Rota Allow Sufficient Supervision for Trainee Anaesthetists?

Dr N Cassells, Dr L Fenner, Dr P Morgan and Dr N Morgan  
*Southmead Hospital, North Bristol NHS Trust*
Simulation training in Emergency Anaesthesia for Major Trauma

Dr S Sen, Dr O’Rourke, Dr B Morrison, Dr F Wilson and Dr Matthew Evans  
*Ashford and St Peters Hospital*
Surrey Region Fellows in Simulation; A Region Wide Project and Collaboration

Ms D Shanee Hapuarachchi, Ms A Liu, Dr A Barry and Dr S Gupta  
*Kings College London*
Survey on Medical Apps Use amongst Medical Students

Dr M Laklouk  
*Leeds Teaching Hospitals*
The Leeds Morbidity and Mortality Registrar experience: a systematic evidence based approach to enhance training in risk management and learning from critical incidents

Dr E Cottrell and Dr G C Lee  
*Hull and East Yorkshire NHS Trust*
Practical Anaesthesia : Educating the Team to achieve the Anaesthetic Goals of an Enhanced Recovery programme

Dr M Kellner, Dr S Warnakulasuriya, Dr S Scott and Dr J Morton  
*Western General Hospital, Edinburgh*
Anaesthetic Trainee led Airway Teaching for Foundation Doctors

Dr K W Tan and Dr J Chestnut  
*Queen Elizabeth University Hospital, Glasgow*
Educational Supervision – how well are we doing?

Dr C Cheah, Dr B Krishnachetty and Dr D Sethi  
*Southend University Hospital and Darent Valley Hospital*
Delivery of Basic Training in Obstetric Anaesthesia – have we got it right?

Dr A Maund, Dr D Booth, Dr C Jones, Dr S Mercer, Dr T Woolley and Dr D Hunt  
*James Cook Hospital, Middlesbrough and Defence Postgraduate Medical Deanery*
Trainees integral role in developing delivery of the Military Anaesthesia Higher Module

Dr P Duggleby, Dr H Gilfillan, Dr C Morris and Dr K Place  
*Stoke Mandeville Hospital*
The Regional Anaesthesia Driving Licence

Dr A Mohabir, Dr T Jones, Dr P Duggleby and Dr C Morris  
*Oxford*
Human Factors – Survey of Knowledge across Oxford Deanery

Dr D C Green and Dr M Walters  
*Royal Derby Hospital*
Quality Improvement of Novice Training

Dr A C Fergusson and Dr T S D Teare  
*Torbay Hospital and Royal Devon and Exeter Hospital*
Pilot of a trainee crash course in ultrasound guided regional anaesthesia in a district general hospital

Dr A Maheswaran  
*University Hospitals of Leicester*
A Dashboard to Monitor Trainee Progress in Achieving Initial Competency in Obstetric Anaesthesia

Dr R Samuels, Dr M Shah and Dr A Choudhury  
*Medway Maritime Hospital*
A is for Airway! How live In-Situ Simulation in ED Resus demonstrates Major Environmental and Systems Inadequacies and Lack of Training in Airway Emergencies