1680b USING PRECISION TEACHING AS A FRAMEWORK TO SUPPORT SIMULATION BASED EDUCATION

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Traditional approaches to skills training are insufficient for developing competency in a safe and ethical manner. There is a need for the evaluation of novel skills training approaches. Simulation Based Education (SBE) has emerged as a popular solution allowing learners to perform procedures, make mistakes and receive feedback in an environment that replicates real life. Many institutions are investing heavily in the purchasing of simulators. However, there is a lack of consensus regarding best practice for employing simulation technology to teach skills and the frequent lack of consideration given to educational framework, or instructional design, may be criticised. Behavioural fluency has been described as 'that combination of accuracy plus speed of responding that enables competent individuals to function efficiently and effectively in their natural environment.' Behaviour that is learnt to fluency is Retained for longer periods of time, individuals can Endure performing the skill for longer durations, can Adapt the behaviour learnt by performing it as part of a new, more complex, compound behaviour, can Perform the skill at a rate that makes it functional and their performance is Stable regardless of distraction (REAPS). Precision teaching (PT) has been defined as 'a system for defining instructional targets, monitoring daily performance, and organising and presenting performance data in a uniform manner to facilitate timely and effective instructional decisions. The crucial difference between other educational interventions and interventions including PT is the focus on the speed of performance, as the 'flow' of behaviour is the hallmark of fluency and high accuracy alone is insufficient for producing the outcomes of behaviour fluency (ie, REAPS). This presentation describes our experience and research in using PT to teach technical skills in a simulated environment and describes an effect of training in the lab, in practice and on patient outcomes.

1680c ANALYSING OUTCOMES: DECIDING WHAT TO LEARN IN POSTGRADUATE MEDICAL TRAINING

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In 2017 RCPI designed a methodology for transforming traditional post graduate training curricula to outcome based curricula. This model was applied to, and refined with a pilot. Background research for the project was based on education theory but the methodology itself takes the approach of a job analysis. An overview of how job analysis is performed will be discussed together with its links to competencies and outcome-based education.

713 OCCUPATIONAL HEALTH GUIDELINES IN NORWAY

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Introduction Quality improvement is a continuous challenge in medical work.

Methods In order to promote better quality in all medical disciplines, the Norwegian Medical Association in the late 1990ies encouraged all medical specialties to consider which topics could fit for standardised procedures. The Norwegian Association of Occupational Physicians decided to ask experienced occupational physicians to develop guidelines in their respective fields of work. These guidelines were posted on the Internet, and were thus made widely available for free.

Results By 2017, about 130 guidelines are published. The guidelines are continuously updated and revised, and new guidelines are developed when needed. After more than 15 years on the Internet, they are well known among Norwegian occupational physicians. In an informal survey among around 100 occupational physicians we experienced that all participants knew the guidelines, about 50% consider them as part of their daily 'toolkit', and new, inexperienced, colleagues found a good basis for their work in these guidelines.

Conclusion The idea and the structure of the internet page will be presented in a poster, and the web page demonstrated on a laptop. We hope that they will be an inspiration for other associations of occupational health personnel.

930 NETWORK PROJECT, ROMANIAN EXPERIENCE

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Introduction Training undergraduate students in occupational medicine is a challenge for university teachers. To choose an 'interesting' curriculum, to present problems in an attractive way, to maintain students' interest are some aspects that we must take in consideration. In Timisoara we apply blended learning for our students.

Methods NetWoRM ('Net-based Training for Work-Related Medicine') is an international project for remote education in occupational medicine, which was initiated by the Institute of Occupational and Environmental Medicine of the Ludwig Maximilian University in Munich.

It was implemented in Romania, Timisoara, Medicine University since 2007. Virtual patients from Casus platform were available for Timisoara students in Romanian and English language. Classroom participation is encouraged too, considering it can improve student achievement.

Results Students had to solve voluntary ten occupational medicine cases. These were typical cases: Running nose and breathlessness fits, Stomach cramps and anaemia, The Flight attendant, Forestry worker with white fingers, Needle stick injury, They who search will find, Patient with chronic dyspnoea needs your help!, Bright like the sun, Work accident due by alcohol, Workplace Survey. In the period of 2014–2017 1255 users worked in 11 532 sessions (11 325 were finished). There were 9.04 sessions per student, with 29.27 min average time spent to solve one case.

Conclusion Teaching with virtual patient was effective. The virtual cases are well accepted and capture the interest of students. The positive experience of using NetWoRM in UMFVBT for more than 10 years is a good reason to continue.