



TURKISH ASSOCIATION
FOR MEDICAL
EDUCATION



HACETTEPE UNIVERSITY
FACULTY OF MEDICINE
DEPARTMENT OF MEDICAL EDUCATION AND
INFORMATICS

2nd SIMULATION IN MEDICAL EDUCATION CONFERENCE

16 - 18 November 2012
Ankara - TURKEY

www.simec2012.org

Simulation & Patient Safety

CONFERENCE BOOK



Hacettepe University Culture Center, S Hall, Sıhhiye - Ankara

with the
endorsement
of



Association of Standardized
Patient Educators



Society in Europe for Simulation
Applied to Medicine

Merhaba*,

Turkish Association for Medical Education, in collaboration with Hacettepe University Faculty of Medicine is organizing the second regional conference on simulation.

We are very pleased to welcome participants with an interest in simulation from Eastern Europe and Middle East. The program addresses all components of simulation: simulated/standardized patients, simulators and virtual patients.

'Simulation' and 'Patient Safety' are becoming sister concepts in health sciences education, and are chosen as this year's theme of the conference. We are excited to welcome participants from all healthcare professions in the continuum of health sciences education.

This meeting offers participants the opportunity to meet professionals from neighbor countries, share their experiences, and begin to collaborate.

We are proud that participants from 11 countries attended the first meeting in 2010.

We look forward to seeing you in Ankara.



Melih Elçin
Chair, SIMEC 2012

Chair: Melih Elçin

Hacettepe University, TURKEY

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Nevin Avcı

Nabeha Tahrir

Iretiola Albert

16 November 2012 Friday	
08:30-11:30	Registration
09:45-10:00	Openning & Welcome (Hall S) Melih Elçin (Turkish Association for Medical Education, Turkey)
10:00-11:00	Plenary Session 1 (S Hall) Chair : Abdulaziz M.A. Boker (King Abdulaziz University, Kingdom of Saudi Arabia) Keynote : The Humans in Simulation: Embedding Standardized Patients into Education Mary Cantrell (Center for Clinical Skills and Simulation Education - University of Arkansas for Medical Sciences, USA)
	Cafebreak
11:15-12:00	Oral Presentations 1 (Hall S) Chair : Yeşim Yiğiter Şenol (Akdeniz University Faculty of Medicine, Turkey) 1.1 The Clinical Skills & Simulation Center: Is It Assisting in Teaching Clinical Skills to the Medical Students or Is It Becoming A Trend In All Medical Schools in Saudi Arabia? Sumaiah A. Abdulwhab (King Abdulaziz University, Kingdom of Saudi Arabia) 1.2 Using role play in multidisciplinary teams to make health care safer for patients with diabetic neuropathy. Zhanar Shalkharova (International Kazakh-Turkish University named after Ahmet Yesevi, Kazakhstan) 1.3 Teaching and Assessing Core Competencies Using an Integrated Approach to Curriculum Design Anca Dana Buzoianu, Valentin Muntean, Ofelia Mosteanu, Soimita Suciuciu, Teodora Pop, Tudor Calinici. ("Iuliu Hatiegnu" University of Medicine and Pharmacy Cluj- Napoca, Romania) 1.4 Standardized Guidelines by WHO on "Patient Safety Curriculum" and the Existing Undergraduate Medical Curricula of Pakistan. Iram Khursheed (Aga Khan University, Pakistan) 1.5 Assessment of Psychometric Properties of Rubric for Evaluating Interprofessional Collaborative Physicians and Nurses Competencies in Iran by the Use of Simulated Videos of Emergency Team Work Mandana Shirazi, Fatemeh Keshmiri, Kamran Soltani Arabshahi, Farhad Shahi, Amiralli Sohrabpour (Tehran University of Medical Sciences, Iran)
	Lunch
13:30-17:30 13:30-15:30	Parallel 'How-to' Workshops 1 Workshop 1A (Training and Assessment Center) Debriefing Simulation and Other Practical Learning Experiences Mary Cantrell (Center for Clinical Skills and Simulation Education - University of Arkansas for Medical Sciences, USA)
15:30-17:30	Workshop 1B (Training and Assessment Center) Quality Assurance of Standardized Patient Case Portrayal and Checklist Completion Mandana Shirazi, Laila Sedighpoor (Tehran University, Iran), Yeşim Yiğiter Şenol (Akdeniz University, Turkey)
13:30-17:30	Workshop 1C (Simulation Lab at Department of Nursing) Using High Fidelity Simulation for Patient Safety Füsün Terzioğlu, Leyla Özdemir, Sergül Duygulu, Handan Boztepe, Zahide Tuna (Hacettepe University Faculty of Health Sciences - Dept. of Nursing, Turkey)
08:30-17:30	Posters (Poster & Exhibition Area)
17 November 2012 Saturday	
09:30-11:00	Registration
09:30-10:30	Plenary session 2 (Hall S) Chair : Serguei Boulatov (Kazan State Medical School, Russian Federation) Keynote : Medical Simulation: From Aviation to Medicine and Beyond M. Emin Aksoy (SIMMERK, Istanbul Health Directorate, Turkey)
	Cafebreak
10:45-12:00	Oral Presentations 2 (R Hall) Chair : Sevgi Turan (Hacettepe University Faculty of Medicine, Turkey) 2.1 Evaluation of Efficiency of Rational Drug Usage Course in Nursing in the Scope of Patient Safety Vesile Unver, Tulay Basak, Cigdem Yuksel, Gulden Guvenc, Hatice Ayhan, Gulsah Kose, Ozlem Aslan, Emine Iyigun, Sevinc Tastan, Dilek Konukbay (Gulhane Military Medical Academy, School of Nursing, Turkey) 2.2 Medical Students' Attitudes toward Doctor-Patient Relationship: A Comparative Study between Externs and Interns Iman Jahanian ¹ , Azim Mirzazadeh ² , Farhad Shahi ² , Sirous Jafari ² , Edward Krupat ³ (¹ Babol University of Medical Sciences, Iran; ² Tehran University of Medical Sciences, Iran; ³ Harvard Medical School, USA) 2.3 Students' Opinions on Using Simulated Patients as an Assessment Method Serdar Özdemir, Şeniz Ergin, Cüneyt Orhan Kara, Tamer Edirne, Eylem Teke Değirmenci, Füsün Şahin, Günfer Turgut. (Pamukkale Universty, School of Medicine, Denizli, Turkey)

10:45-12:00	<p>2.4 High Fidelity Simulation in Nursing Education: The Effects on Students' Confidence and Satisfaction. Sergül Duygulu¹, Füsün Terzioğlu¹, Zahide Tuna¹, Handan Boztepe¹, Leyla Özdemir¹, Sevgisun Kapucu¹, Guillaume Allinier², Filippo Festini³, Nadiye Özer⁴, Serap Ejder Apay⁴, Yeliz Akkuş⁵, Mediha Baybuğa⁶, Zöhre Irmak⁶, Nuriye Yıldırım⁷, Ali Karakoç⁷, Nuran Akdemir¹ (Hacettepe University, Faculty of Health Sciences, Nursing Department, Turkey; ²The University of Hertfordshire, England; ³University of Florence, Italy; ⁴University of Atatürk, Faculty of Health Sciences, Nursing Department, Turkey; ⁵Kafkas University, Kars School of Health Services, Turkey; ⁶Mugla University, Mugla School of Health, Turkey; ⁷Association of Research and Development in Nursing, Turkey)</p> <p>2.5 Influence of Education Program on CPR Knowledge of Interns Fariba Raygan, Fakhrosadat Mirhoeseini, Zeinab Ahmadikia (Kashan University of Medical Sciences, Iran)</p> <p>2.6 Developing Dentistry Interprofessional/Interpersonal Collaborator Skills (IPCS) Rubric in Iranian Context Batool Amini, Mohammad Moein Namdari, Leyla Sedighpoor, Mandana Shirazi (Tehran University of Medical Sciences, Iran)</p> <p>2.7 Modified OSCE Examination in Tbilisi State Medical University Irma Manjavidze, Zurab Vadachkoria, Rima Beriashvili, Salome Samkharadze (Tbilisi State Medical University, Georgia)</p>
	Lunch
13:30-17:30 13:30-14:30 13:30-15:30 14:30-15:30 15:30-17:30	<p>Parallel 'How-to' Workshops 2 Workshop 2A (Simulation Lab at Faculty of Medicine) High Fidelity Simulation Case: Drowning Dilek Kitapçioğlu, Gülay Eren, Ulufer Sivrikaya, Emel Koçergür, Yeşim Abut (SIMMERK, Istanbul Health Directorate, Turkey)</p> <p>Workshop 2B (Clinical Skills Lab 2) Hybrid Simulation: Integrated Cases for Patient Safety Orhan Odabaşı, Ece Abay (Hacettepe University Faculty of Medicine, Turkey)</p> <p>Workshop 2C (Simulation Lab at Faculty of Medicine) High Fidelity Simulation Case: Cardiac Arrest Dilek Kitapçioğlu, Gülay Eren, İnci Paksoy, Kerem Erkalp, Sezen Avtan (SIMMERK, Istanbul Health Directorate, Turkey)</p> <p>Workshop 2D (Training and Assessment Center) Assessment in Simulation Based Education Melih Elçin (Hacettepe University Faculty of Medicine, Turkey), Abdulaziz M.A. Boker (King Abdulaziz University, Kingdom of Saudi Arabia)</p>
09:30-17:30	<p>Posters (Poster & Exhibition Area)</p> <p>P01. Essential Need of Virtual Models in Medical Education Shima Tabatabai (Shahid Beheshti University of Medical Sciences, Iran)</p> <p>P02. The Simulated/Standardized Patient Programme Used in Nursing Students Education about Rational Drug Usage Tulay Basak, Vesile Unver, CigdemYuksel (Gulhane Military Medical Academy, School of Nursing, Turkey)</p> <p>P03. Simulator Use in Training Clinical Skills at Ataturk University School of Medicine Zeliha Cansever, Ü.Zeynep Avşar, Hamit Acemoğlu (Ataturk University, School of Medicine, Turkey)</p> <p>P04. Emphasis on Healthcare Students' Cultural Competency and Communication Using Standardized Patients Mohamud Verjee¹, Guillaume Alinier² (¹Weill Cornell Medical College in Qatar, Qatar; ²University of Hertfordshire, UK)</p> <p>P05. Assessing the General Physician's Performance, Regarding Management of Psychiatric Patient Complaints, Who are Working in Community Mental Health Center Compared with the Other GP's Working in Private Clinic by the Use of Standardized Patients. Maryam Karbasi Motlagh, Homayun Amini, Mandana Shirazi, Majid Sadeghi, Batool Amini (Tehran University of Medical Sciences, Iran)</p> <p>P06. Assessing the Effect of Interprofessional Communication Skills Education on Communication and Counseling Skills of Senior Pharmacy Students Working in Pharmacies of Tehran University of Medical Sciences by the Use of Standardized Patients. Maryam Safarnavadeh¹, Mansour Rastgarpanah², Mandana Shirazi², Mahboobeh Mafinejad Khabaz², Maryam Karbasi Motlagh² (¹Kerman University of Medical Sciences, Iran; ²Tehran University of Medical Science, Iran)</p> <p>P07. First Year Medical Students Views on Intramuscular Injection Training with Hybrid Simulation Sevgi Turan, Orhan Odabaşı, Barış Sezer (Hacettepe University Faculty of Medicine, Ankara, Turkey.)</p> <p>P08. Assessing the Effects of Interprofessional Skills Education on Attitude and Performance of Fellowships, Residents and Nurses in Rheumatology Units of Tehran University of Medical Sciences Hospitals by the Use of Standardized Patients: Interventional Study Mandana Shirazi¹, Tahereh Faezi¹, Fatmeh Keshmiri¹, Maryam Karbasi Motlagh¹, Sari Ponzer² (¹Tehran University of Medical Sciences Iran; ²Karolinska Institute, Sweden)</p>

09:30-17:30	<p>P09. Residents' Opinions on Learning Fine Needle Biopsy by Using Potato as Simulation Material Serdar Özdemir, Cüneyt Orhan Kara, Ferdar Bir, Tamer Edirne (Pamukkale University, School of Medicine, Turkey)</p> <p>P10. The Influence of Teaching Clinical Skills on the Clinical Attitude of Students of the Medicine of Birjand Medical Sciences University Gholam Reza Faal, Maryam Masomy, Faegheh Zojaji, Zohreh Soorgi, Mohammad Masood Khalesi, Yahya Mohammadi, Mohammad Bagher Rozegar (Birjand University of Medical Sciences, Iran)</p> <p>P11. Investigating the Effect of Method of Simulation in Nursing Education Hale Sezer, Fatma Orgun (Ege University, Faculty of Nursing, Nursing Education Department, Turkey)</p> <p>P12. Self Assessment of Intern's CPR Competency in Kashan University of Medical Sciences Fakhrosdat Mirhoseini, Fariba Raygan, Parastoo Pourmaghshband (Kashan University of Medical Sciences, Iran)</p> <p>P13. Medical Students' Attitudes towards Simulation and Communication Skills Learning Sevsen Cebeci, M. Ramazan Yiğitoğlu (Fatih University Medical School, Turkey)</p> <p>P14. The Last but the Most Important Part of Simulation Education: Debriefing Handan Boztepe, Füsün Terzioğlu, Sergül Duygulu, Zahide Tuna, Sevgisun Kapucu, Leyla Özdemir, Nuran Akdemir (Hacettepe University, Faculty of Health Sciences, Nursing Department, Turkey)</p> <p>P15. Assessing the Medical Student's Level of Happiness as an Effective Factor in Patient Safety Elham Raizan, Ahmad Sabouri Kashani, Zeinab Arvandi, Maryam Karbasi Motlagh, Mandana Shirazi (Tehran University of Medical Sciences, Iran)</p> <p>P16. Using Hybrid Simulation to Teach Suturing Skill Orhan Odabaşı, Sevgi Turan, Arif Onan (Hacettepe University Faculty of Medicine, Ankara, Turkey)</p> <p>P17. Assessing the Validity and Reliability of "Attitudes to Health Professionals Questionnaire" in Iranian Context to Improve Patient Safety Najafi Maryam, Najafi Minoo, Noushin Kohan, Mandana Shirazi, Massomeh Sharifi, Maryam Karbasi Motlagh (Tehran University of Medical Sciences, Iran)</p> <p>P18. Team STEPPS Teamwork Attitudes Questionnaire in order to Promote Patient Safety: Validity and Reliability in Iranian Context. Najafi Minoo, Najafi Maryam, Fatmeh Keshmiri, Mandana Shirazi, Mojgan Khani Mazlaghani (Tehran University of Medical Sciences, Iran)</p> <p>P19. Evaluation of the Students' Feedbacks For Difficult Patient Interview N. Bilge Başusta, Barış Sezer, Ş. Ece Abay (Hacettepe University Faculty of Medicine, Ankara, Turkey)</p> <p>P20. Conditions Facilitate Learning by Medical Simulations Mehrnaz Geranmayeh (Tehran University of Medical Sciences, Iran)</p> <p>P21. Evaluation of the Students' Perceptions on Communication Skills Training at Hacettepe University Faculty of Medicine Ş. Ece Abay, Melih Elçin, N. Bilge Başusta. (Hacettepe University Faculty of Medicine, Ankara, Turkey)</p> <p>P22. Using the Simulated Video to Assess Medical Students' Interprofessional Skills in Tehran University of Medical Sciences Niusha Vahidpour, Mohammad Moein Namdari, Ahmad Sabouri, Zeinab Arvandi (Tehran University of Medical Sciences, Iran)</p> <p>P23. Simulation Level 0: On-line Case Study Method for Teaching Nursing Skills Figen Işık Esenay¹, Ayşegül İşler² (¹Ankara University, Faculty of Health Sciences, Turkey; ²Akdeniz University, Antalya School of Health, Turkey)</p> <p>P24. Evaluation of the Standardized Patient Encounters on Ethical Issues Melih Elçin, Ş. Ece Abay, Arif Onan (Hacettepe University Faculty of Medicine, Ankara, Turkey)</p> <p>P25. Simulation in Pediatric Nursing Education Emine Efe (Akdeniz University, Antalya School of Health, Turkey)</p> <p>P26. Simulation in Nursing Education Ayşegül İşler¹, Figen Işık Esenay² (¹Akdeniz University, Antalya School of Health, Turkey; ²Ankara University, Faculty of Health Sciences, Turkey)</p> <p>P27. Learning with Simulation at Clinical Education for Nursing Zeynep Canlı Özer (Akdeniz University, Antalya Health School, Turkey)</p> <p>P28. Assessing Last Year Medical Students Attitude toward Interprofessional Learning Minoo Pakgohar, Mohammad Mirshahvalad, Batool Amini, Hamid Reza Baradaran, Parvin Pasalar (Tehran University of Medical Sciences, Iran)</p>
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18 November 2012 Sunday

10:00-13:30	<p>Social Program</p> <p>Guided Walking Tour through Hamamönü and Ulucanlar Prison Hamamönü, the district of historical Ankara houses in the surrounding neighborhood of Hacettepe University had been restored by Altındağ Municipality, and became an attraction point for national and international travellers. Ulucanlar Prison was the place where many people were kept, tortured and executed in the past; now a museum. (Refreshments are provided)</p>
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KEYNOTE PRESENTATIONS

16 November 2012 • 10:00 - 11:00

The Humans in Simulation: Embedding Standardized Patients into Education



Mary Cantrell, MA.

University of Arkansas for Medical Sciences, Center for Clinical Skills and Simulation Education, Little Rock, Arkansas - USA

Ms. Cantrell is the Executive Director of the Center for Clinical Skills and Simulation Education at University of Arkansas for Medical Sciences. She started working at UAMS in 1993 with one of the first Standardized Patient Programs in the south. She completed her graduate work at the University of Arkansas in Little Rock where she studied communications that focused on the doctor and patient relationship. She hosted an international Standardized

Patient Educators Conference in 1997 and became the founding president of the international Association of Standardized Patient Educators, which was formed in 2001. She has presented workshops and papers on the use of Standardized Patients and Clinical Skills Training at medical meetings in the United States, Mexico, Canada, Spain, the Netherlands, Egypt, and India. As Executive Director she works with all colleges and hospital staff at UAMS and helped develop the first practical examination using standardized patients for United States pharmacy students. In 2006 she also became the Director of the Pediatric Learning and Understanding through Simulation Education (PULSE) Center at Arkansas Children's Hospital. This year she started her third center in Northwest Arkansas and The Walker Center for Clinical Skills Education will open in the spring of 2013. She worked on a National Cancer Institute Grant for The Delta Grant for Minority Women where she trained women to teach and assess the clinical breast exam skills of practicing physicians and nurses. She has trained over 100 women to teach breast examinations and pelvic examinations. In 1998 Mary became one of a few site trainers for the Standardized Patient Pilot Project of the National Board of Medical Examiners and has since served as a consultant for the Step 2 CS exam. In addition to running the programs at UAMS and ACH, she has done consulting with the University of Tennessee at Memphis and Louisiana State University in Shreveport, Texas Children's Hospital, University of Texas Arlington as these schools developed their programs in clinical skills and simulation. Among the many papers and posters she has presented she contributed a chapter about Standardized Patients to the third and fourth additions of the Practical Guide for Medical Teachers by John Dent and Ronald Harden. She now serves on the Leadership Institute at UAMS, the UAMS Arts Council and the UALR Alumni Board as chair of the membership committee. She is appointed faculty of the Department of Medical Humanities.

The Humans in Simulation: Embedding Standardized Patients into Education

Ms. Cantrell started working as an SP in 1988 in a department of one, herself. She soon understood the importance of this modality and started the program at UAMS in Little Rock, AR. The profession of Standardized Patient Educators is very young. The person with the most experience has been doing so for less than 40 years. Educating with real patients as the teaching tool makes so much sense, but what most people don't know is that there is a method behind the science of training people to be a 'real' patient. The following is an outline of what will be shown in the keynote address.

1. Short History of SPs in Healthcare Education
2. What SPs can and cannot do
3. SPs as a teaching tool
4. SPs as a teacher
5. SPs in Simulation
6. SPs as undercover patients
7. Future of SPs in education

Medical Simulation: From Aviation to Medicine and Beyond



M. Emin Aksoy, MD, PhD

SIMMERK, Istanbul Health Directorate, Turkey

Mehmet Emin Aksoy graduated from Karadeniz Technical University Faculty of Medicine after he had finished Sankt Georg Austrian High School. Then he graduated as a Family Physician from Taksim Training and Research Hospital. After he had got Master's Degree at Boğaziçi University Biomedical Engineering Department, he was conferred upon the degree of Doctor of Philosophy in Biomedical Engineering at the same university. He is the founder of the first Medical Simulation Center in Turkey which was established under the supervision of Istanbul

Health Directorate. Mehmet Emin Aksoy is fluent in German and English. He has been the director of Simmerk Medical Simulation Center and is now working on "I-Sim Virtual Hospital" project. Dr. Aksoy still continues to serve as Associate Director in Istanbul Health Directorate.

Medical Simulation: From Aviation to Medicine and Beyond

Most of the know-how of the basic simulation rules for medical simulation techniques has been taken over from aviation. There are also similarities between doctors and pilots in terms of the risk of these professions and their dependence on technology. Although the first flight simulator has been developed in 1928 and simulation became an official part of the flight training in the 1950's. It took approximately another 50 years until the medical simulators came into widespread use for supporting the medical education.

On the contrary to aviation, there are still no obligatory regulations for the medical professionals for taking part in certification programs using medical simulation modalities. The most common cause of medical errors is the human factor with incidence of 60-70%. This means that we must focus on techniques to reduce human errors during medical procedures and medical simulation is one of the best techniques for this purpose, because both technical skills and teamwork concept can be optimized by using medical simulators. Another advantage of applying medical simulation to medical education is the improvement of the patient safety during medical procedures.

Istanbul Health Directorate has been running a medical simulation center, Simmerk, for the last five years and over 2700 health professionals consisting of medical doctors, nurses and paramedics have been trained so far. But the capacity of this center was only enough for the local needs of health professionals of Istanbul City.

The need for a training center for all the medical doctors in Turkey was noticed by the MoH (Ministry of Health) of Turkey. Another goal of this project is also giving courses to foreign health professionals. The new concept combines e-learning, dry lab, standardized/simulated patients and wet lab for different disciplines of medicine. Besides conventional techniques, new techniques like robotic surgery or hybrid surgery trainings will be performed in the new center. The new center consists of a campus existing of a hospital building, an administration building, a building with conference rooms with varying capacities and a dedicated hotel building with 54 beds.



SIMMERK - Istanbul Health Directorate Medical Simulation Center

SIMMERK was founded by the Istanbul Health Directorate in 2007. SIMMERK is the first multidisciplinary medical simulation center in Turkey and aims to support the postgraduate medical education with the help of different simulation modalities. The content of the simulation courses given in this center is suitable for the following professions:

Physicians

- Complimentary courses for different medical resident doctors
- Specific courses for medical specialists

Nurses

- Postgraduate courses

Paramedics

- Courses with different emergency scenarios

Anaesthesiology Technicians

- Scenarios of the possible complications during operations.

Others

- Medical device application courses for biomedical professionals using mannequin based simulators.

Besides medical simulation courses designing of task trainers and developing mathematical models are also two points of interests of the R&D team of the center.

SIMMERK plans to move to its new center the so called "I-SIM Virtual Hospital" in the first quarter of 2013. The new center "I-Sim" is designed as a medical education campus and includes dry lab, wet lab, standardized/simulated patients and e-learning modalities. A hotel building for the trainees is also included in the campus.

'HOW-TO' WORKSHOPS

16 November 2012

Workshop 1A (Training and Assessment Center) • 13:30-15:30

Debriefing Simulation and Other Practical Learning Experiences

Mary Cantrell (Center for Clinical Skills and Simulation Education - University of Arkansas for Medical Sciences, USA)

After being trained to conduct manikin based simulation the author adapted the same debriefing technique to the already existing hands on training for the colleges at her institution. Students appreciated the feedback after each exercise and it soon became the norm. The aim of the workshop is to discover debriefing guidelines and tools for any practical educational experience.

Outline

1. 30 min - Debriefing didactic
2. 20 min - Scenario review
3. 1 hour - Hands on Debrief practice

When the workshop is over the participant's outcomes will be

- Understanding of debriefing techniques
- Practical knowledge of debriefing tools
- Develop debriefing strategies for their own use

Workshop 1B (Training and Assessment Center) • 15:30-17:30

Quality Assurance of Standardized Patient Case Portrayal and Checklist Completion

Mandana Shirazi, Laila Sedighpoor (Tehran University, Iran), Yeşim Yiğiter Şenol (Akdeniz University, Turkey)

The facilitators will present the importance of quality assurance in SP performances, discuss the validity and reliability issues in SP methodology, and practice within the groups.

By the end of the workshop, participants will be able to:

1. Define validity and reliability as it applies to the evaluation of SP portrayal and checklist completion
2. Evaluate the quality of an SP's portrayal by the use of observational checklist
3. Evaluate the quality of an SP's checklist completion of a learner's communication skills using the Calgary Communication Evaluation tool.

Workshop 1C (Simulation Lab at Department of Nursing) • 13:30-17:30

Using High Fidelity Simulation for Patient Safety

Füsün Terzioğlu, Leyla Özdemir, Sergül Duygulu, Handan Boztepe, Zahide Tuna (Hacettepe University Faculty of Health Sciences - Dept. of Nursing, Turkey)

There are numerous studies showing the positive impact of using simulation to the clinical training of health care professionals. Although the technology and pedagogy around simulation have progressed significantly to develop clinically competent health care professional for providing safe and quality health care, it has not been the case everywhere such as in Turkey. This workshop aims to contribute to the use of high fidelity simulation as an innovative teaching strategy in nursing and other health care professionals' education. At the end of the workshop; the participants will be able to gain some understanding of the using high fidelity simulation in health care education and gain skills to use high fidelity simulation in education through scenarios. The workshop covers; using simulation in health care education, development of simulation scenario, creating simulation environment and simulation process (brief, simulation, and debriefing) through interactive learning activities. The participants will find an opportunity to prepare high fidelity simulation scenarios, and to perform in a simulation scenario.

Workshop 2A (Simulation Lab at Faculty of Medicine) • 13:30-14:30

High Fidelity Simulation Case: Drowning

Dilek Kitapçioğlu, Gülay Eren, Ulufer Sivrikaya, Emel Koçergür, Yeşim Abut (SIMMERK, Istanbul Health Directorate, Turkey)

The facilitators will present the system, have the participants perform in the scenario, and debrief. The session will end with the discussion of the workshop.

By the end of the workshop, participants will be able to:

1. Define the 2010 resuscitation algorithm
2. Work as a team
3. Achieve the crisis management skills

Workshop 2B (Clinical Skills Lab 2) • 13:30-15:30

Hybrid Simulation: Integrated Cases for Patient Safety

Orhan Odabaşı, Ece Abay (Hacettepe University Faculty of Medicine, Turkey)

The hybrid simulation provides a more relevant environment for students to achieve clinical and communicational skills: Integrating part task trainers and/or simulators with standardized patient, or designing cases for the interaction with the simulator and/or standardized patients.

At the end of the workshop, participants will be able to:

1. Design cases for hybrid simulation
2. Train SPs for those cases
3. Conduct training sessions

Workshop 2C (Simulation Lab at Faculty of Medicine) • 14:30-15:30

High Fidelity Simulation Case: Cardiac Arrest

Dilek Kitapçioğlu, Gülay Eren, İnci Paksoy, Kerem Erkalp, Sezen Avtan (SIMMERK, *Istanbul* Health Directorate, Turkey)

The facilitators will present the system, have the participants perform in the scenario, and debrief. The session will end with the discussion of the workshop.

By the end of the workshop, participants will be able to:

1. Define the 2010 resuscitation algorithm
2. Perform in the emergency case in a standardized way
3. Work as a team
4. Achieve the crisis management skills

Workshop 2D (Training and Assessment Center) • 15:30-17:30

Assessment in Simulation Based Education

Melih Elçin (Hacettepe University Faculty of Medicine, Turkey), Abdulaziz M.A. Boker (King Abdulaziz University, Kingdom of Saudi Arabia)

Assessing the performance of the students at the end of the skills training is an important issue of simulation based education. Different tools can be used for a variety of skills. The educators may need specific tools for specific skills.

By the end of this workshop, participants will be able to:

1. Define checklists, rubrics, and other evaluation tools
2. Choose the appropriate tool for a specific skill
3. Evaluate the efficiency of each tool.

ORAL PRESENTATIONS

S1

USING ROLE PLAY IN MULTIDISCIPLINARY TEAMS TO MAKE HEALTH CARE SAFER FOR PATIENTS WITH DIABETIC NEUROPATHY.

Zhanar Shalkharova

International Kazakh-Turkish University named after Ahmet Yesevi, Kazakhstan

Background: Approximately one-third of patients with diabetes are suffered from diabetic distal symmetric polyneuropathy. Patients' safety depends closely on the cooperation of different specialties. It requires developing core professional, communicative and collaborative competencies which are in focus for training at all stages of medical education.

Aim: The aim of the study was to identify gaps and decide the ways of harm reduction for management of patients with diabetic neuropathy.

Method: We developed a one-day workshop with the use of role-play, simulated patient and 9-item questionnaire. The scenarios were designed with the aim to reveal gaps in diagnosis, treatment and prevention areas of patient's management in diabetic neuropathy. The purposive sampling included endocrinologists, neurologists, cardiologists and general physicians.

Results/Discussion: 98 physicians have completed three one-day workshops. There were endocrinologists (33%), neurologists (31%), cardiologists (14%) and general physicians (22%). The workshops have revealed the gaps in diagnosis and management of diabetic neuropathy because of work hours restriction and different points of view in different specialties. Among the propounded possible ways to minimize gaps several decisions have been made: (1) to use the TSS and NDS scales for the basic diagnosis of diabetic neuropathy in all specialist profiles for endocrinologists, neurologists, cardiologists and general physicians; (2) to provide a general management framework for patient safety; (3) to increase the relative weight of developing core professional competencies like "ability to recognize limits and ask for help" and "ability to work in a multidisciplinary team" in the structure of undergraduate and postgraduate medical education.

S2

EVALUATION OF EFFICIENCY OF RATIONAL DRUG USAGE COURSE IN NURSING IN THE SCOPE OF PATIENT SAFETY

Vesile Unver, Tulay Basak, Cigdem Yuksel, Gulden Guvenc, Hatice Ayhan, Gulsah Kose, Ozlem Aslan, Emine Iyigun, Sevinc Tastan, Dilek Konukbay

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Background: Starting from academic year 2011-2012, "rational drug usage course" is a part of our intern training program. Our experience in 2011-2012 showed that this course was very efficient for the students.

Aim: This years research was conducted to assess the effectiveness of "rational druge usage course" in academic year 2012-2013 in terms of patient safety.

Method: The study was designed and carried out as a quasi-experimental study in Gulhane Military Medical Acedemy, School of Nursing in Turkey between September and October 2012. There is a total of one hundred eight nursing students in the school. The data of the study were obtained through the use of objectively constructed evaluation form (OCEF) that was administered both at pretest and posttest and through the feedbacks of the participants regarding the course on the rational use of medicines. Patient with Chronic Obstructive Pulmonary Disease (COPD) using dry powder inhaler was used as the case in pretest. In the post test, the same case is repeated. However; to evaluate the intern's attitude of using the knowledge taught in the course and to asses simulated patients used prescriptions which were written for a different patient.

Result: In general, students in this course have been succesful. On the other hand, it has been discovered that students' knowledge and practice on patient safety needed to be improved.

STANDARDIZED GUIDELINES BY WHO ON "PATIENT SAFETY CURRICULUM" AND THE EXISTING UNDERGRADUATE MEDICAL CURRICULA OF PAKISTAN.

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Background: Safe healthcare delivery is the ultimate outcome of undergraduate medical education (UGME) & it is prudent to address issues that may affect the healthcare outcomes of society, specifically the harm produced by medical errors.

Aim: To justify the need to incorporate patient safety (PS) education at UGME-level by adopting standardized guidelines laid down by World Health Organization (WHO).

Method: Considering the rising issues and concerns related to PS in a local context, a position statement is presented along with evidence based justification in order to demonstrate that the perspective is valid and worth implementing.

Results/Discussion: Various medical schools worldwide have already implemented PS curricula and are deliberating its importance vigilantly. In Pakistan, no concrete work has so far been done on PS integration at UGME level & no curricular guidelines are included in the form of policy document from the regulatory bodies. Globally, main drawback is the variability in the scope and sequence of PS education in medical schools ranging from single-session interventions to fully integrated longitudinal themes. WHO has addressed this issue by launching multi-professional Patient-Safety-Curriculum-Guide (WHO-PSCG). There is a dire need to educate our future doctors regarding PS, thereby adopting a system which is compatible with the modern delivery of safe health care, where patients and public can have confidence on the professionals & also on their regulators. The regulatory bodies & health care systems need to ensure the integration of PSCG within the existing medical curricula across Pakistan in a standardized manner by incorporating WHO-PSCG.

MEDICAL STUDENTS' ATTITUDES TOWARD DOCTOR-PATIENT RELATIONSHIP: A COMPARATIVE STUDY BETWEEN EXTERNS AND INTERNS

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Background: Medical educators have emphasized the importance of patient centered care so that patient centeredness should be at the heart of medical education.

Aim: This study investigated the attitudes of clinical medical students in Babol University of Medical Sciences toward doctor patient relationship.

Method: We performed this analytical study cross sectionally in our teaching hospitals. We

randomly selected 72 students, 43 ones (59.72%) were externs (years 5-6) and 29 ones (40.28%) were interns (year 7). We utilized Patient Practitioner Orientation Scale (PPOS) that differentiates between a patient centered vs. doctor centered orientation toward medical practice. It consists of 2 sub scales, sharing and caring. Data were analyzed by SPSS15.0.

Results: Mean caring score of interns was 3.56, sharing was 3.03 and total PPOS was 3.29. Mean caring score of externs was 3.88, sharing was 3.14 and total was 3.51. Interns and externs showed significant difference in caring (P value=0.007) and total scores (Pvalue=0.041) but not in sharing (P value=0.378). 31 students (43.1%) were male and 41 ones (56.9%) were female. Mean caring score of male students was 3.03, sharing was 3.55 and total was 3.29. Mean caring score of female students was 3.14, sharing was 3.90 and total was 3.52. According to gender, they showed significant difference in caring (P value=0.006) and total scores (P value= 0.034) but not in sharing (P value=0.534).

Discussion: Female students and students in earlier years of medical school have more patient-centered attitudes compared to male students and students in later years, respectively. Also younger and more studious students showed more patient centeredness. We recommend doctor-patient communication course and further research to explore the dynamics in patient centered care.

THE CLINICAL SKILLS & SIMULATION CENTER: IS IT ASSISTING IN TEACHING CLINICAL SKILLS TO THE MEDICAL STUDENTS OR IS IT BECOMING A TREND IN ALL MEDICAL SCHOOLS IN SAUDI ARABIA?

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Introduction: The Faculty of Medicine at King Abdulaziz University, is committed to provide high quality educational program to both Women and Men undergraduate students; that equips them with knowledge, skills and Islamic ethics, laws and attitudes; which enables graduates to make a valuable contribution in primary, secondary, and tertiary healthcare services; and reinforces graduates to take the best advantage in the labor market. The Clinical Skills & Simulation Center (CSSC) is very well equipped. It consists of 40 rooms equipped with over 1000 task models and manikins as well as other virtual and high technology facilities to aid simulation of procedural practices and clinical skills training.

Methods: The CSSC provides a safe environment for students, graduates and staff members. The center adopts a booking service system for 3 categories of sessions: (a) Regular sessions scheduled in the curriculum for the 4th year medical students in the Clinical Skills Module whereby 14 groups use the CSSC in two shifts for five days a week for 20 weeks which is the whole duration of the module, the 5th year medical students use it in the Obstetrics/Gynecology and Pediatrics clerkships; thus four groups use the center twice weekly for 12 weeks, and finally the 6th year students book the center for their Internal Medicine and Surgery clerkships according to the skills required. (b) Walk ins for self directed learning (SDL) which usually occur during the break time from 12:00 to 01:00 and mounts to approximately 30 times per month. Students, however, who do not encounter patients with a particular condition, are able to remedy the gap by a simulated experience in the CSSC. After analyzing the data collected of all the medical students who had visited the Clinical Center since it was reopened in King Abdul Aziz University hospital in the fourth floor in 2007 until 2012, and from the CSSC annual reports showed total contact hours (CH) were over 1,100,000 (CH is time spent multiplied by number of utilized visitors). Ninety three to ninety six percent of the medical students agreed that the CSSC is very well equipped and helps them to be exposed to clinical cases that they have missed during their clinical rotations. The CSSC is also used by students for further peer to peer training and self directed learning.

Results: The Faculty of Medicine had secured development of curriculum by taking actual steps for making optimum use of the CSSC, so it became part of the formal curriculum schedule. The FOM makes every effort to create an appropriate learning environment with good practice of clinical and procedural skills and adhering to the value of practicing within the limits of their competence, and making sure that patients are not put at unnecessary risk.

Conclusion: The CSSC plays a major role in maintaining and promoting the acquisition of clinical skills of the medical students and other health care professionals. The CSSC provides infection and hazard free safe teaching environment for students, graduates, and faculty members.

TEACHING AND ASSESSING CORE COMPETENCIES USING AN INTEGRATED APPROACH TO CURRICULUM DESIGN

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Background and Aim: In a traditional approach to medical education, problems about the coverage of skills areas do not arise seriously in any theoretical way. Implementation of an integrated curriculum for training in advanced clinical skills represents an unmet need in most Romanian medical faculties. The eMediqual project (European level quality and competency in medical education and educational programs management) attempted to establish an interdisciplinary program to teach and to assess clinical skills.

Methods: Teaching objectives and lesson formats were developed in a multistep process in order to ensure an early and consistent exposure of students to core competencies. A teaching program for cardiovascular pathology was structured and continuous lecturer trainings were established. Several clinical disciplines cooperated in order to integrate the practical skills training into the pre-existing medical curriculum.

Results: We applied a top-down approach for the instructional design. The goal was identified then broken down into smaller steps. The teacher's role was crucial in structuring the integrated curriculum. It also involved the ability to respond to students' interests as they arise and to provide deeper acknowledgement of the immediate learning situation using simulation sessions in our Simulation Center and case presentations and workshops. The next step was the field-testing with groups of students during a national Summer School organized by our university.

Discussion and Conclusions: Introducing an interdisciplinary cardiovascular training and a corresponding practical skills development in a medical curriculum is feasible. Staff development is a key influence on the effectiveness of this type of teaching for students. Teaching in a clinical context and a multidisciplinary approach seem to be important factors for ensuring practical relevance.

Acknowledgement: These data are part of the POSDRU project no 86/1.2/S/63815 EMEDIQUAL from the FSE-POSDRU 2007-2013.

S7

STUDENTS' OPINIONS ON USING SIMULATED PATIENTS AS AN ASSESSMENT METHOD

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Introduction: Clinical skills should become an integral part of the curriculum in most modern medical schools allowing all students to take part in learning and assessment opportunities they require for clinical skills. Simulation-based learning and assessment can help mitigate this aim by developing health professionals' knowledge, skills, and attitudes while protecting patients from unnecessary risk.

Aim: The aim of the study was to evaluate students' opinions on using simulated patients as an assessment tool integrated to an Objective Structured Clinical Examination.

Methods: Ten sixth grade students took part in an OSCE containing nine stations. In four of eight clinical practical procedure stations, simulated patients were used to evaluate the students. The duration of the stations was determined as seven minutes. One week before the exam, explanation including the formative aim of the procedure, which clinical skills they will be responsible, no scoring at the exam and that simulated patients will be used was shared with the students. In addition, introductory information and answers to the questions from the students about OSCE and simulated patients were given immediately before the exam. Analysis of the video recording of a focus group study with the same students was done.

Results: Opinions of the students on using standardized patients are as follows: "I think that simulated patients are much more objective than the confusing exam at the bedside." "Stations included patients that we might meet in the practice. Therefore, it was an useful procedure." "Although theoretically insufficient, it was appropriate for practical skills." "Simulated patient were really realistic." "I was able to see my deficiencies considerably." "I will pay more attention on history from now on." "I felt that the patient was role-playing which was disturbing." "I loved the simulated patients; I would like all the exams to be in this form"

Conclusion: Students believe that using simulated patients is an objective assessment method and the clinical skills assessed are equivalent to medical practice. Assessment using simulated patient allows for highly reliable feedback which was underpinned by the students after the exam. Simulated patients can be used alone or integrated to OSCE as an assessment tool.

S8

HIGH FIDELITY SIMULATION IN NURSING EDUCATION: THE EFFECTS ON STUDENTS' CONFIDENCE AND SATISFACTION.

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Background: Recently, as an innovative teaching strategy high-fidelity simulation nursing education is becoming more common to improve nursing students' clinical skills and competencies. Although previous studies shows that simulation based teaching contributed to nursing students' satisfaction and self confidence, there is no study results related to using high fidelity simulation in nursing education and effects on students' satisfaction and self confidence in Turkey.

Aim: This study aims to determine effects of high fidelity simulation on students' satisfaction and self confidence.

Methods: The sample consisted of 20 nursing students who studied at one university and completed high fidelity simulation experience related to the care of trauma patients. Student Satisfaction Question Form and Patient Intervention Self-Confidence/Competency Scale were used as study tools. Descriptive statistical analysis and ANOVA were used for data analysis.

Results: After simulation session students' satisfaction mean score was $114 \pm 5,09$ and confidence/competency score was $76,35 \pm 5,69$. There was a statistically significant positive correlation between students' satisfaction score and confidence/competence scores ($r=0,974$, $p < 0,000$). Students also stated that high fidelity simulation was effective to improve their clinical skills and competencies.

Conclusion: This study shows that students' satisfaction and confidence/competency improved after participating high fidelity simulation sessions. According to the study results, it is recommended to use high fidelity simulation in nursing education as an innovative teaching strategy to develop students' clinical competencies.

S9

INFLUENCE OF EDUCATION PROGRAM ON CPR KNOWLEDGE OF INTERNS

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Background: Assessing the educational programs is clearly necessary to get feedback in order to improve programs but there is no data of traditional CPR training program's efficacy in Kashan University of Medical Sciences.

Aim: Evaluation of new teaching methods (simulators) against traditional CPR training program.

Method: A valid test based on AHA2010 CPR Protocol carried out through both cases (who educated traditional CPR training) and control (who not educated CPR) groups.

Results/Discussion: A significant difference between the mean score of two groups revealed ($p \leq 0,001$) but also lack of CPR competency of both groups detected. Despite the traditional CPR training influence the intern's CPR competency but not completely effective so CPR training program need to be revised.

S10

ASSESSMENT OF PSYCHOMETRIC PROPERTIES OF RUBRIC FOR EVALUATING INTER-PROFESSIONAL COLLABORATIVE PHYSICIANS AND NURSES COMPETENCIES IN IRAN BY THE USE OF SIMULATED VIDEOS OF EMERGENCY TEAM WORK

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Background: This study addresses one of the most important issue of interprofessional competencies: assessment.

Aim: The aim of the study is to assess the reliability and validity of the rubric for evaluating interprofessional collaborative competencies within Iranian context.

Method: The study was investigated through descriptive correlation method. The reliability was calculated base on test- retest and Cronbach alpha approach. In validity was done through three methods including content validity, face validity and external validity.

Results: The content and face validity was confirmed through two rounds of Delphi. The external validity was assessed base on translation and back translation by one of the native English language expert. A kappa coefficient for assessing rubric test-retest approach was 0.9 and Cronbach alpha 0.85.

Discussion: The results of the study was indicated that the rubric is a valid and reliable tool for assessing inter-professional collaborative practice among health providers in the Iranian context.

S11

DEVELOPING DENTISTRY INTERPROFESSIONAL/INTERPERSONAL COLLABORATOR SKILLS (IPCS) RUBRIC IN IRANIAN CONTEXT

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Background: Highly levels of medical service and social care require collaborative skills such as teamwork, communication skills and understanding of roles. Reviewing the literature has been revealed that improving these skills will lead to a better medical service in many aspects and improving patient safety.

Aim: To develop Dentistry Interprofessional/Interpersonal collaborator Skills (IPCS) rubric in Iranian context for promoting dentistry team work and achieving patient safety.

Method: This descriptive-correlational study. The tool was developed based on the core competencies of dentistry (developed by Dental Educational Association), Iranian national curriculum of dentistry's core competencies and other relevant literature. Validation of tool was assessed based on the Delphi method through two rounds among experts in relevant fields such as medical education, psychology and dentistry. Following that based on the results, the final version was developed. Three different scenarios based on the objectives of IPCS tool, developed by expert group through eight experts panels. Based on these scenarios the simulated videos were compiled. Three simulated videos had been made for assessing the reliability of tool through test-retest approach. Following watching videos by raters, they will rate the tool for two times.

Results: The number of items in first draft of rubric were 40 and in final draft the number of items decrease to 27 based on the results of Delphi methods . The items were in four domains. Assessing the reliability is ongoing.

Discussion: Iranian Dentistry IPCS tool is valid for assessing interprofessional communication skill. It could be used for IPCS in dentistry.

S12

MODIFIED OSCE EXAMINATION IN TBILISI STATE MEDICAL UNIVERSITY

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Background: OSCE (Objective Structured Clinical Examination) represents integrated method revealing students' communication and clinical skills in reality based simulated environment. Students' evaluation is based on standardized methods.

Aim: Estimation of TSMU exam materials, evaluation criteria and exam environment adequacy to international standards is the main aim of our research.

Method: Questionnaire was used for modified OSCE participant Georgian and English language students. Also, international expert evaluated 10 "stations" with different clinical tasks according to 3 criteria: communication, manipulation (Clinical Skills) and exam environment. Each student had 7 min. for each task and 1 min. for logistic.

Results/Discussion: 24 students took part in modified OSCE. Each student evaluated each station with 5 point system according to 6 criteria: medical equipment and materials were perfect in each station (average 4.5 points); lector's attitude to students (average 4.6 points); task content was clear (average 4.9 points); tasks weren't difficult (tasks were estimated like difficult than root mean with 3.5 points); time was enough for each

task (average 4.8 points); almost all students indicated that they revealed their skills (average 4.5 points). Prof. Babill Stray-Pederson Expert -gave positive evaluation to exam quality and noticed that exam is objective, well planed and compatible to international standards.

The main recommendation was about modified OSCE evaluation objectivity. Maximal points on each station should be 20-24, to make students evaluation more objective. The summary point of student is positive if it is 65% of maximum points.

POSTERS

P1 ESSENTIAL NEED OF VIRTUAL MODELS IN MEDICAL EDUCATION

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Aim: The aim is to introduce a collection of free virtual models and useful links to medical university web-sites for students in Iran medical university.

Methods: The virtual models are part of the Medical Biochemistry, Molecular and Cellular Biology (MCB) course, which was designed to ensure implementation of flexible web-based problem solving oriented interactive e-learning in Medical Biochemistry. We review Medical Biochemistry, Molecular and Cellular Biology (MCB) virtual models are used worldwide to help understanding and learning of complex molecular structures and visualisation of dangerous or expensive experiments.

Results: The virtual models and links are useful for self learning, traditional lecture-based and problem based learning, and medical education e-learning systems. They are also appropriate for regular and distance e-learning in basic bio-medical sciences as biochemistry.

Conclusions: Use of virtual models is important also because the students at the universities belong to net or digital generation. The generation is unique because they are expert users of computer and internet technology since they were grown up with digital technologies and virtual reality. The virtual models are relevant to their style of thinking and perception. Virtual models are essential tools for better learning of abstract concepts in biomedical sciences.

P2 THE SIMULATED/STANDARDIZED PATIENT PROGRAMME USED IN NURSING STUDENTS EDUCATION ABOUT RATIONAL DRUG USAGE

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Background: Often known as standardized patients, simulated patients were first described by Howard Barrows in 1960's. This method is used effectively in clinical skills training these days. The basic goal of training with standardized patient methodology is to introduce students with someone who is pretending to be a patient providing a real environment.

Aim: In this study, it was aimed to introduce the application of simulated patients in our rational drug use training programme.

Methods: In academic year 2010-2011, simulated patients were first used for rational drug use training in GMMA School of Nursing. The rational drug use practice in our intern training programme is comprised of 22 hours. With this training, it was aimed to have intern nurses learn dose calculations for some drug administrations which are oftenly encountered in clinical practices, monitor side effects and train patients.

Results: To achieve these goals, 19 scenarios has been created for mostly encountered drug administrations. Scenarios are prepared in meetings in which all the responsible faculty members are present.

P3 SIMULATOR USE IN TRAINING CLINICAL SKILLS AT ATATURK UNIVERSITY SCHOOL OF MEDICINE

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This abstract presents the body of knowledge about the simulators used at our department in clinical skills training and the contribution of simulators to education.

Medical education has been developing and changing with each passing day. Simulator use in medical training has been popularized and has replaced traditional methods. Education using simulators is used in many areas such as engineering and space sciences.

Our department has two clinical skills laboratories. Various simulators for blood pressure measurement, bladder catheterization, venous blood sampling, IV fluid administration, injection application, and auscultation of cardiac and respiratory sounds are used in the clinical skills trainings of preclinical students. Simulator use has many advantages, including providing a feeling of self-confidence to students, avoiding worries of dangerous applications, preparation for clinical applications, feeling as a physician, and making learning easier by enabling them to repeat. Thanks to these applications, they acquire various experiences. Simulators are also important to establish a comfortable education environment and are appropriate for all types of learning. Simulators can also be used in objectively structured clinical examinations to evaluate students. However, activities including taking history of the patients, using body language can only be possible with standardized and simulated patient practice. Because the medical profession is directly related to human life, simulators are imperative for patient safety in the education of students in the modern era.

P4 EMPHASIS ON HEALTHCARE STUDENTS' CULTURAL COMPETENCY AND COMMUNICATION USING STANDARDIZED PATIENTS

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Background: A large number of educational healthcare programs around the world make use of standardized patients (SPs) to help students acquire important skills in relation to patient assessment, communication, and professionalism. In parallel, SPs play an important role in the assessment of students' competencies in these domains.

Aim: There is published evidence that key factors affect patients' compliance to a physician's recommendations. Towards the top of the list are the patients' ethnicity and the prescriber-patient relationship. These two factors are directly linked to the cultural awareness and competency of a physician. The findings of this literature review are congruent with the findings of a recent patient satisfaction study conducted in Qatar highlighting the importance of the patient-physician relationship.

Method: Qatar has an inherent conservative Arab culture. The country's rapid growth in infrastructure, and knowledge based society goals bring together people from all around the world, with varying cultures and levels of expectations. The medical student population is as varied as the entire population of Qatar. At an early stage, the need to formalize cultural competency education in the medical program has been met by the opening of a Center for Cultural Competency in Health Care in 2009.

Discussion: This study examines why and how simulation using SPs can enrich the students' learning experience from a cultural competency perspective to help become better practitioners in our society and ensure patient satisfaction at the same time.

P5 ASSESSING THE GENERAL PHYSICIAN'S PERFORMANCE, REGARDING MANAGEMENT OF PSYCHIATRIC PATIENT COMPLAINTS, WHO ARE WORKING IN COMMUNITY MENTAL HEALTH CENTER COMPARED WITH THE OTHER GP'S WORKING IN PRIVATE CLINIC BY THE USE OF STANDARDIZED PATIENTS.

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About 21 percent of our population at least gets one mental disorder throughout his/her life, since there is no possibility of providing health services by a small number of psychiatrists in our country to these large number of population, Community Mental Health Center (CMHC) has been designed in Tehran with aim of changing urban mental health to provide services to neurotic disorder patients (depression and anxiety disorder) by GPs.

Assessing the GP's performance with psychiatric patient complaints in (CMHC) compared with other physician's performance in private office by the use of SP.

SP will assess physician's routine performance. Group of expert psychiatrist wrote five scenarios including minor depression, major depression with severe suicide thought, panic disorder, disseminated anxiety and psychotic disorder. They prepared a checklist for each scenario to assess physician's performance. SP and psychiatrist will complete the checklist according to SP physician interaction and physician's clinical performance such as prescription (kind of drug, dosage) and implication. Twenty SPs trained in 8 sessions 2 hours (16hr), for achieving optimal performance, their performance will record to give feedback them. We will select physician randomly from list of CMHC and then one SP by specific scenario will go there. Immediately after returning from physician's office, SP will fill the physician performance checklist that assesses communication skills, attention to mental health issues, education, recommendations, and time allocation. Finally physician performance of two centers will be analyzed.

P6 ASSESSING THE EFFECT OF INTERPROFESSIONAL COMMUNICATION SKILLS EDUCATION ON COMMUNICATION AND COUNSELING SKILLS OF SENIOR PHARMACY STUDENTS WORKING IN PHARMACIES OF TEHRAN UNIVERSITY OF MEDICAL SCIENCES BY THE USE OF STANDARDIZED PATIENTS.

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Background: Pharmacists are as an interface with other medical colleagues and the ordinary people. When the pharmacist-patient relationship is effective, it has an extensive role in improving the quality of care and treatment. About 30% of pharmacists avoid communicating with patients because of the lack of effective communication skills.

Aim: Assessing the effect of interprofessional communication skills education on communication and counseling skills of senior pharmacy students working in pharmacies of TUMS by the use of SP.

Method: It is a controlled trial research 100 senior pharmacist's students of TUMS, in training course, were included in both control and intervention group randomly based on a stratified randomization. The questionnaire and checklist are designed by experts' team and validated in Iran in first phase of the study. For SPs training, several experts in the pharmaceutical and medical education provide different scenarios of common diseases and medications that are commonly prescribed tips and advice that should be provided at the time of drug delivery by pharmacist. Twenty SPs will be trained in 4 sessions by pharmacists and medical educationists. SP's performance will be recorded and get feedback in order to achieve optimal performance. SPs will go to the pharmacy in two times before and after pharmacist's students participating in two days 4 hours workshops. SPs will play their roles, and then SPs will complete the checklists regarding each pharmacist's students' performance after each encounter.

Results: The checklists are validated by the use of Delphi method and ten experts in two rounds participated in this phase of study.

P7 FIRST YEAR MEDICAL STUDENTS VIEWS ON INTRAMUSCULAR INJECTION TRAINING WITH HYBRID SIMULATION

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Background: Simulation is increasingly being used to train clinical skills. Simulation techniques vary from simple part-task trainers to complex simulators. A part-task trainer is a device that replicates limited aspects of a task but does not present an integrated experience. Hybrid simulation can be used to overcome this limitation of simulation and improve the fidelity.

Aim: We aimed to assess first year medical students' views on intramuscular injection skill training with hybrid simulation between 2009 and 2011 academic years.

Method: We initiated to train intramuscular injection skill to Phase I students with hybrid simulation in 2009-

2010 academic year. Tutors of small group gave immediate feedback to the students during the practice. SPs performed a new scenario for each student. We conducted an electronic questionnaire at the end of the session. We calculated the frequency and percentages of student's answers. The questionnaire was filled by 305 students in 2009, 262 students in 2010 and 334 students in 2011.

Results/Discussion: Students' views were grouped in five themes: materials, method, students, tutors, and satisfaction. Most of the students rated "agree" to questions on efficiency of material (92%) and tutor (85%). Questions about students' beliefs on performing the skill were rated as "4" or "5" by 73% of students. Students indicated that self-practice helped their learning and the skills were appropriate for phase 1 students. However almost half of the students stated that they could not find the opportunity to repeat the skill, and learn it adequately. More than 97% of the students stated that they were satisfied with the training.

P8

ASSESSING THE EFFECTS OF INTERPROFESSIONAL SKILLS EDUCATION ON ATTITUDE AND PERFORMANCE OF FELLOWSHIPS, RESIDENTS AND NURSES IN RHEUMATOLOGY UNITS OF TEHRAN UNIVERSITY OF MEDICAL SCIENCES HOSPITALS BY THE USE OF STANDARDIZED PATIENTS: INTERVENTIONAL STUDY

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Interprofessional education is a kind of education that people learn from each other, together and aim of this shared learning is increasing patient safety. Physician and nurse cooperation, mutual perception and partnership in clinical decision making will lead to patient's satisfaction and patient safety. On the other hand, costs and medical errors will reduce.

Assessing the effects of interventional education based on interprofessional skills, on attitude and performance of fellowships, residents and nurses in rheumatology units of TUMS's hospitals by the use of SP.

It is a quazi experimental research 32 individuals fellowships, residents and nurses (available) will be recruited. In intervention group 16 of participants are working in Shariati and Imam Khomeini hospitals rheumatology wards in control group we have the same numbers in Firoozgar and Rasool hospitals. Five phases are carried out, 1st Phase: training assessors in the field of interprofessional communication skill by the use of standardized patients and showing videos in one day workshop, 2nd Phase: the pretest will be done during 3 consecutive weeks, phase 3: running one day workshop in the field of inter professional communication skills' for target group by showing the videos and SP, Phase 4: post test in both groups three weeks after educational intervention, Phase 5: the analysis of results. Performance will be evaluated in the real environment by using rubric of interprofessional communication skill (six main domains including communication, collaboration, roles and responsibilities, teamwork, collaboration with the patient and his family, and conflict management) and attitude will be evaluated by Using RIPLS (teamwork domains associate, professional identity and roles and responsibilities). All the instruments had been validated in Iran.

RESIDENTS' OPINIONS ON LEARNING FINE NEEDLE BIOPSY BY USING POTATO AS SIMULATION MATERIAL

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Introduction: Simulation, in all its incarnations, is a tremendous tool for healthcare educators, in that it allows students to achieve these goals without patients being put at risk. Simulation-based training has also found utility in procedural and surgical skills training. Fine needle biopsy (FNB) is a widely used diagnostic technique for head and neck masses as well as masses in other locations throughout the body.

Aim: To assess the usefulness and feasibility of using potato as simulation material in postgraduate clinical skills education for FNB.

Method: Five Ear-Nose-Throat and six pathology residents were included in the intervention. A medium boiled potato was fixed on the table with adhesive bandage. The bandage was released slightly allowing for some mobilization to simulate a neck mass. Residents used a "FNB Intervention Learning Guide" to undertake the biopsy on the potato. Feedback about the usefulness and feasibility of the procedure was taken by in-depth interview.

Results: Examples of some feedback was as follows:

"I believe that this can be used in residency training." "To be able to try the procedure in advance helps to correct mistakes. Therefore, we should be able to decrease mistakes on the patients." "We learned systematically and step by step. We were able to correct our mistakes before doing harm to the patients." "We could use real human tissue like neck dissection material" "There was no step about communicating with patient" "Useful for systematical learning but mass density changes from patient to patient; potato is not like human tissue."

Conclusion: Residents accept that this intervention provides an advantage for patient safety which is elementary for simulation based learning. Residents reported that this intervention could be used in residency training but not replace real patients which supports that simulation based learning is less real compared with real life events. We believe that this intervention could also be useful in undergraduate learning.

THE INFLUENCE OF TEACHING CLINICAL SKILLS ON THE CLINICAL ATTITUDE OF STUDENTS OF THE MEDICINE OF BIRJAND MEDICAL SCIENCES UNIVERSITY

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Background and Objective: To pass through the intrauterine stage and enter the outside world is probably the most risky occurrence in one's life. In Iran, the resuscitation of neonates is taught in workshops which are very useful to the ones involved in the care of babies. This helps them learn the required skills before attending neonatal clinical skills. This paper tried to study the influence of teaching the neonatal clinical skills on the attitude of students of medicine when dealing with ill babies.

Method: This is an experimental study. we enrolled the medical students of Medical Sciences University of Birjand, "stagers" into two groups (one receiving the required education in the skills lab; the other deprived of the education). The place for education was the skills lab of the university; the class held once a week and continued for two hours. After the term finishes, questionnaires were distributed among the students in the two groups. The instrument included the researcher-generated questionnaire with 11 questions which examined the clinical attitudes of students. Based on Cronbach's Alpha method, it had the reliability of 85%. To analyze the data, the SPSS software and the t-test were applied.

Results: The results indicate that there is a significant difference between the attitudes of the two groups with regard to teaching clinical skills ($p < 0.00$).

Conclusion: Clinical skills training term should be held as part of pediatric ward curriculum of Birjand University of Medical Sciences.

P11 INVESTIGATING THE EFFECT OF METHOD OF SIMULATION IN NURSING EDUCATION

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The use of simulation in nursing education has revealed because of developments in science and knowledge on nursing, development of more specialized role of a nurse and increased the technical area which educational needs. However, the reduction in the duration of hospitalization, increased patient awareness and inadequacy number of nurses, reduction in length of stay of patients, a shortage the clinical experience of undergraduate programs, effects of the opportunities for limited clinical impact. All of these factors for the increasing number of students in ensuring the adequacy of the clinical condition exacerbates learning experiences. In this direction, in order to examine the effectiveness of the method of simulation in nursing education is planned as an experimental study. Second class nursing students who are studying at Ege University Faculty of Nursing reached them by simple random sampling method and sample of 66 students who volunteered to be determined in the experimental and control groups are randomly determined. The data collected by using the "Identifying Information Form", "Knowledge Test", "Scenario", "Simulation Method Evaluation Form", "Patient Information Form", "Visual Analog Scale" and "Patient Education Evaluation Form" will be collected by the researchers. The data are going to analyze by using numbers, percentages, variance and correlation analysis, and t-test. We have already prepared the validity data collection forms asked for expert opinion.

P12 SELF ASSESSMENT OF INTERN'S CPR COMPETENCY IN KASHAN UNIVERSITY OF MEDICAL SCIENCES

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Background: Self assessment is one of the motivation method of education that makes participants to consider their faults according to their point of views.

Aim: To survey the student self-assessment prior to using simulation to teach CPR.

Method: A valid self assessment test including the knowledge, skills and attitude of CPR was carried out before participating CPR training program.

Results-Discussion: The majority of participants confessed to their lack of CPR competency and emphasized on the necessity of this competency. According to their view, the most effective factor to achieve a successful CPR in both out and in hospital is CPR competency and the least is concern for injuring the victim.

P13 MEDICAL STUDENTS' ATTITUDES TOWARDS SIMULATION AND COMMUNICATION SKILLS LEARNING

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Aim: The aim of this study is to investigate if undergraduate students understand the importance of simulation and communication within medical practice.

Method: This study employed a qualitative design to study medical students' attitudes towards simulation and communication skills learning. Focus group methodology was used because the interaction among group members produces data not otherwise obtainable using other qualitative methods such as individual interviews. Four group discussions were convened, representing students from the third year of the medical degree at Fatih University Medical School. A discussion guide was designed to ensure consistency across all four group discussions. It possessed a number of distinct sections: welcome, introduction, anonymity, ground rules, warm up, clarification question, key questions, concluding question and conclusion. The primary purpose of this guide was to act as an aid to memory for the moderators. All four discussions were audiotaped and transcribed in full.

Results: The students understood the importance of communication within effective good medical practice. Medical students thought that being a simulated patient was beneficial for them and it improved their empathic approach and communication skills. They also thought that communication skills learning were fun and exciting and it wasn't a role playing but the preparing profession itself.

P14 THE LAST BUT THE MOST IMPORTANT PART OF SIMULATION EDUCATION: DEBRIEFING

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Hacettepe University, Faculty of Health Sciences, Nursing Department, made project called as, "Use of Simulation: An Educational Strategy to Develop Clinically Competent Nurses". This project focuses on the use of simulation in nursing education as a teaching and learning approach to improve the quality of instruction in nursing education. In this project, facilitator's and a debriefing questions guide was created by reviewed the literature for use in debriefing sessions. To help standardize the debriefings, a debriefing form was used during the debriefings all groups (eight groups). Notes taken by one researcher on the form during the simulation session were used during the debriefing session to highlight areas of good performance and areas for improvement. To further standardize the debriefings, all debriefing sessions were timed and limited to 35 minutes in length. Every simulation was facilitated by a two investigator who also led the debriefing session immediately after the simulation. Debriefing questions were included learning objectives in a simulation scenario. Each debriefing session was consisted of 5 sections. To determine students' responses about their experience with the simulation experience ask two general questions, analysis questions developed accordance with the cognitive, technical and behavioural learning objectives and two summary questions. The students stated that this educational experience provides notice their own skills, competencies and inadequate skills. The majority of students expressed they felt themselves inadequately their non-technical skills such as team collaboration, critical thinking and clinical decision-making skills. Also stated that the errors caused by these deficiencies, as one participant described: "Had a lot of lack of communication We could not listen to each other, so you could not make the right decision..." Another participant said: "Can not get critical decisions We do not know how to calculate drugs no attention to sterility in any way we can not decide to be team and our communication ineffective". In addition, all students described their first simulation experience as so realistic and different.

P15 ASSESSING THE MEDICAL STUDENT'S LEVEL OF HAPPINESS AS AN EFFECTIVE FACTOR IN PATIENT SAFETY

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Background: Happiness includes feeling of glade and none of depression. It has direct effect on psychological health of medical students who will be an important part of health care system early in future.

Aim: This study aims at determining the amount of happiness in under graduate 1st, 3rd and 7th year of medical students at Tehran University of Medical Sciences, in order to be able to compare the level of happiness and its' consequences among these three groups.

Methods: In this cross sectional study the Persian version of Oxford Happiness Inventory (OHI) has been used for data compiling. Questionnaires were completed by 96 of medical students, chosen randomly.

Results/Discussion: The alpha Chronbach, internal consistency reliability was calculated 0.83. The data were analyzed with the SPSS software. Statistical analysis showed that the 1st year medical students had the minimum level of happiness among these three groups and 7th year medical students had the maximum level. The 3rd year medical students' level of happiness is somewhere between these two groups.

Conclusion: It could be due to increase emotional feeling among higher grades' students, who encounter with patient. In comparison with students who are studying basic medical. Increasing the level of happiness among medical students could have effects on their future performance and improving patient safety.

P16 USING HYBRID SIMULATION TO TEACH SUTURING SKILL

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Background: Hybrid simulation combines models with standardized or real patients to improve the fidelity of the simulation.

Aim: We aimed to evaluate students' views on suturing skills training with hybrid simulation.

Method: In this study, we used hybrid simulation for training of suturing. Training consists of the following steps: 1) The introductory course (60 minutes) with a large group (40-45 students) included watching film and discussing each step of the skill. 2) The small group session (5-6 students) included practice of suturing. We used hybrid simulation which is a combination of part-task training model of suturing and standardized patient (SP) in the skill training in small group. SPs were trained to act in five different scenarios. We planned to provide an integrated experience for the students and aimed to improve suturing skill as well as developing communication skills while providing to a high level of authenticity. We conducted an electronic questionnaire at the end of the session. We calculated the frequency and percentages of student's answers. The questionnaire was filled by 325 students in 2011 academic year.

Results/Discussion: Students' views were grouped in five themes: materials, method, students, tutors, and satisfaction. Most of the students were rated "agree" to questions on efficiency of material (87%), method (73%), tutor (89 %), and their beliefs about performing the skill (78%). More than 93% of the students stated that they were satisfied with the training. Hybrid simulation model can be used for clinical skills training in preclinical years with a high degree of student satisfaction.

P17 ASSESSING THE VALIDITY AND RELIABILITY OF "ATTITUDES TO HEALTH PROFESSIONALS QUESTIONNAIRE" IN IRANIAN CONTEXT TO IMPROVE PATIENT SAFETY

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Background: There is widespread interest in measuring factors that are relevant to patient safety. Negative inter professional attitudes, may inhibit team working skills which could have undesirable effects on patient care and safety. Education of health professionals to collaborate with each other will enable them to provide health care services appropriately to cure patients more efficiently.

Aim: The aim of this study is to assess the validity and reliability of Attitudes to Health Professionals Questionnaire (AHPQ) in Iranian context in order to use it in improving of patient care and safety.

Method: This cross sectional survey conducted in Iran in 2012 and investigated attitudes of senior students of medicine and nursing in Tehran University of Medical Sciences to health as the population of the study. A sample of 33 medical and 34 nursing students were stratified from the population. The questionnaire was translated and back translated by expert. Then, the questionnaire was submitted to a panel of ten experts for determining its face and content validity (Delphi's method). The reliability measurement was assessed through test retest approach and it was calculated by (ICC) and Chronbach's alpha tests.

Results: Content and face validity of the tool were approved and the test retest reliability assessed. The reported total Cronbach's alpha coefficient for the AHPQ is 0.882. The instrument is considered as reliable.

Discussion: The AHPQ appears to be a useful instrument for the assessment of inter professional attitudes in the health professions. This will help to improve team training efforts, which is supporting effective teamwork and safe patient care.

P18**TEAM STEPPS TEAMWORK ATTITUDES QUESTIONNAIRE IN ORDER TO PROMOTE PATIENT SAFETY: VALIDITY AND RELIABILITY IN IRANIAN CONTEXT.****Najafi Minoo¹, Najafi Maryam¹, Fatmeh Keshmiri², Mandana Shirazi³, Mojgan Khani²**¹Tehran University of Medical Sciences, Students' Scientific Research Center, Tehran, Iran;²Tehran University of Medical Sciences, Educational Development Center, Tehran, Iran;³Tehran University of Medical Sciences, Medical Education Department, Tehran, Iran, and Karolinska Institute, Clinical Science Education Department, Stockholm, Sweden

Background: Many organizations have cited the importance of teamwork in patient safety. Team STEPPS, stands for Team Strategies and to Enhance Performance and Patient Safety. This study was an attempt to assess reliability and validity of Team STEPPS Teamwork Attitudes Questionnaire in Iranian context.

Aim: The aim of this study is to assess the Validity and Reliability of Team STEPPS Teamwork Attitudes Questionnaire in Iranian context in order to promote patient safety.

Method: This cross sectional survey conducted in Iran in 2012 and investigated attitudes of senior students of medicine and nursing in Tehran University of Medical Sciences to health as the population of the study. A sample of 33 medical and 34 nursing students were stratified from the population. The questionnaire was translated and back translated by expert. Then, the questionnaire was submitted to a panel of ten experts for determining its face and content validity. To determine the reliability, through and to determine the reliability, test retest approach and it was calculated by (ICC) and Cronbach's alpha tests coefficient were used.

Results: Content and face validity of tool and reliability confirmation were approved. Total Cronbach's alpha was 0.807.

Conclusion: Since validity of this instrument is approved in an Iranian context, it can be used to measure attitudes about inter-professional skill in order to promote patient safety.

P19**EVALUATION OF THE STUDENTS' FEEDBACKS FOR DIFFICULT PATIENT INTERVIEW****N. Bilge Başusta, Barış Sezer, Ş. Ece Abay**

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Background: Effective communication between doctor and patient is a central clinical function. Communication skills practice is very important in medical education. In the assessment of clinical competence it is important to observe the student interacting with a patient. Standardized patients are used for teaching communication skills in Hacettepe University before clinical phase.

Aim: The main aim of this research is to evaluate the difficult patient interview in communication skills task according to the students' feedbacks.

Materials and Methods: Phase II students of Hacettepe University Faculty of Medicine were the subjects of this study. Students were asked to complete two forms; the feedback form of communication skills and the feedback form of patient interview. Descriptive statistics such as frequencies and percentages were used for the data gathered from 336 students' feedback form of communication skills. On the other hand the second form were investigated by examining the open ended answers of 361 students.

Results/Discussion: Students' feedbacks of the communication skills were generally positive. Students who filled the feedback form of communication skills rated their practice over 4. Several students have suggested the need for further training in communication skills. Most of the students taking this interviews reported that they felt themselves more effective and efficient as a doctor after these communication skills sessions. Students suggested that this kind of sessions in communication skills should be varied and increased.

P20**CONDITIONS FACILITATE LEARNING BY MEDICAL SIMULATIONS****Mehrnaz Geranmayeh**

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Background: Medical simulations like simulated patients (SPs), standardized patient or high fidelity manikins used widely in medical education for student's better learning.

Aim: There are some principals that help medical teachers to facilitate learning while working with medical simulators. The purpose of this study is to explore some of them.

Method: We searched through relevant databases in education.

Results-Discussion: Most important principals are: Providing feedback, repetitive practice, curriculum integration, range of difficulty level, controlled environment, individualized learning. Feedback, knowledge of results of one's performance, is the single most important feature of simulation-based medical education toward the goal of effective learning. Skill repetition in practice sessions gives learners opportunities to correct errors, polish their performance, and make skill demonstration effortless and automatic. Simulation-based education should be built into learners' normal training schedule to better learning. Effective learning is enhanced when trainees begin at basic skill levels, demonstrate performance mastery against objective criteria and standards, and proceed to training at progressively higher difficulty levels. In a controlled clinical environment learners can make, detect, and correct patient care errors without adverse consequences, while instructors can focus on learners, not patients. The opportunity for learners to have reproducible, standardized educational experiences where they are active participants, not passive bystanders, means that learning experiences can be individualized for learners, adapted to one's unique learning needs.

P21

EVALUATION OF THE STUDENTS' PERCEPTIONS ON COMMUNICATION SKILLS TRAINING AT HACETTEPE UNIVERSITY FACULTY OF MEDICINE

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Background: At the beginning, the first year students have 2-hour lecture related to "Basic Principles of Communication Skills". They watch a teaching video and discuss how to establish the good doctor-patient relationship in the small groups. One week later students perform an interview with SPs, and are videotaped. Students' perceptions on their experiences with standardized patient interviews are obtained by using two assessment tools.

Aim: The main aim of this research is to compare students' perceptions between two interviews during the year.

Materials and Methods: Phase I students were asked to complete the feedback form of communication skills and the feedback form of patient interview for two consequent interviews. Descriptive statistics such as frequencies and percentages were used for the data gathered from feedback form of communication skills (357 students for the first interview and 332 students for the second one). On the other hand the second form were investigated by examining the open ended answers of 383 students for the first interview and 366 students for the second interview.

Results and Discussion: For the first interview 219 students (61,3%) declared that "Given time for interview was sufficient". On the other hand, for the second interview 187 students (56,3%) declared that time was sufficient. It shows that as the students gained the experience they found the given time for the interview was insufficient. For the second form most of the students (91.6%) shared that they felt themselves as doctors and SP interviews should be done frequently for both interviews.

P22

USING THE SIMULATED VIDEO TO ASSESS MEDICAL STUDENTS' INTERPROFESSIONAL SKILLS IN TEHRAN UNIVERSITY OF MEDICAL SCIENCES

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Background: It has been globally accepted that taking care of patients needs team work and appropriate inter-professional skills; health providers and those working at health care centers find out that there are considerable challenges to build interprofessional teams and educate learners to have effective teamwork. Simulation can help raising awareness of the existing problem's nature for planning better training programs in order to improve interprofessional skills and patient safety, as the result.

Aim: The study was conducted to assess TUMS medical students' awareness of interprofessional skills by using a simulated video.

Method: For this cross sectional study, high fidelity simulated scenarios on actual interprofessional behavior was prepared by an expert group and 65 interns at TUMS were chosen through cluster random selection in 2011 and 2012. The interns, after watching the video filled a valid and reliable questionnaire with Cronbach's alpha of 0.60. After collecting the questionnaires, the data were analyzed via SPSS software.

Results-Discussion: Data analyzing demonstrates the average score gained by the students is 1.42, meaning the student are aware of imperfect interprofessional behaviors and are passing the developing stage; however, it seems that they should learn more about interprofessional skills. Women average score was 0.1 more than men but no significant relation was found between students' gender and age and their interprofessional behavior.

P23

SIMULATION LEVEL 0: ON-LINE CASE STUDY METHOD FOR TEACHING NURSING SKILLS

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Nursing education is critically linked to understanding caring techniques and patient responses that can be examined through case studies. Case-study methodology provides a non-traditional approach to the description of nursing practices from the perspective of the patient. These descriptions lay the foundation for research that is vital in nursing education.

As a result, case studies provides innovative and comprehensive approach to patient care, promote nurses knowledge and critical decision making abilities and encourage nurses to bridge the gap between content knowledge and critical application. Case study activities allows nursing students to increase their clinical competencies and supports patient safety.

Although case analysis is so important in nursing education, there are some challenges in traditional classroom education due to overcrowded classes. Within the theory section trainees can demonstrate their knowledge through a written exercise in Simulation Level 0. The technology has provided a format for online case studies. The evolution of computer technology applications in nursing education has promoted active student learning using critical thinking. The addition of the computer-mediated, on-line cybercases to a well established course in the curriculum, introduces nursing students to a required skill for continuous learning. On-line case study method can be seen as an alternative to traditional classroom training.

P24

EVALUATION OF THE STANDARDIZED PATIENT ENCOUNTERS ON ETHICAL ISSUES

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Background: 'Ethical and Professional Values' is one of the sections of 'Good Medical Practice' Program at Hacettepe University Faculty of Medicine. The students have discussions, assignments, presentations, and watch specially selected movies to achieve values and behaviours related to ethical and professional issues in the first two years of the program. They have standardized patient (SP) encounters on ethical issues in the third year. We designed four scenarios including domestic violence, futile treatment, letting die, allocation of health care resources. The students read the situation just before entering the room, and interview with SP. The interviews are captured, and the students reflect and receive peer and tutor feedback in the consequent session on their performance.

Aim: The aim of our study is to evaluate students' perceptions on SP encounters and their performances. We used two feedback forms to gather the data. Students answers two open ended questions about SP encounters in the first form after leaving the room. The second form contains 8 statements and they choose the best description for their perceptions after watching their videos and getting feedback. 199 third year students completed both forms.

Results and Discussion: The students evaluated the physical environment, scenarios and SP performances while describing their thoughts and feelings. 82% of the students had positive thoughts on SP encounters: "I thought it was one of the most important training we should attend, and I was completely satisfied", "I felt myself like a real doctor", "The scenario and the SP were very realistic because I witnessed a very similar case

when I was voluntarily working at a hospital". The main concern about those session was the lack of a training session or a lecture before those SP encounters. We should evaluate the program and try to add an additional session to have a more effective training on ethical issues.

P25 SIMULATION IN PEDIATRIC NURSING EDUCATION

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Simulation-based learning is increasingly being integrated into pediatric nursing education for students as well as novice nurses in practice. Various levels of technology in simulation provide for a range of cognitive, psychomotor, and affective skills acquisition within the controlled setting provided by this teaching strategy. This article provides an overview of simulation, the emergence of simulation in nursing education with an emphasis on pediatric nursing, a description of one baccalaureate program's experience in developing a state-of-art maternal child-simulation skills laboratory, and the role of simulation-based learning in continuing education. As pediatric educators look for innovative teaching methods to deal with challenges in nursing education and staff development, simulationbased learning offers great potential. This rapidly emerging teaching modality provides learners with the opportunity to address multiple domains of critical thinking and skills performance. In contrast to traditional clinical teaching, simulation gives learners exposure to events that they may not encounter in the clinical setting, as well as the opportunity to assume leadership roles in simulated emergencies involving sick infants and children. These innovative teaching strategies also can be used to help nurses prepare to re-enter the workforce, to enhance specialty training, and to provide learners with the opportunity to work with other health professionals in interdisciplinary practice scenarios.

P26 SIMULATION IN NURSING EDUCATION

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Simulation is rapidly becoming important in nursing education. Nursing education has taken place in the lecture room, the psychomotor laboratory, and in the health care delivery setting, to enhance theoretical learning, simulation, in its many forms, has been added. The types of simulation used in nursing education include anatomical models, task trainers, role playing, games, computer-assisted instruction, standardized patients, virtual reality, and low-high fidelity mannequins. For the most part, these types of simulation, with the exception of anatomical models, task trainers, and role playing, have been introduced to nursing education in the past 40 years. Due to limited availability of clinical sites, shorter hospital stays for patients, a fewer clinical practice hours because of faculty shortage, nursing students are not always able to receive appropriate clinical experiences. Because of the lack of clinical experiences, nursing students rehearse their clients in high risk situations. For patient safety, nurses' clinical competence is important. Literature offered that simulation in nursing education was vital to building a safer health care system. The use of simulation as a teaching strategy, plays a key role for students to learn new clinical and cognitive skills within the safety of a clinical learning. Simulation is perceived by nursing faculty to be important element in nursing education. Nursing faculty members are challenged to prepared nurses for complex environments and work with interdisciplinary teams. Supportingly, the available literature on simulation and nursing education also proved that simulation is useful in creating a learning environment which contributes to knowledge, skills, safety and confidence.

P27 LEARNING WITH SIMULATION AT CLINICAL EDUCATION FOR NURSING

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Simulation-based assessment provides an opportunity for improving safety and quality as a part of Professional regulatory programs. Many health care professions require substantial training within a discipline before entering unsupervised practice, but after leaving training, new knowledge, skills, and procedures emerge. Simulation can serve as both a training tool and assessment method to help ensure.Goals at learning with

simulation;to provide a state-of-the-art learning, teaching, and research environment for students and faculty;to promote acquisition of basic and advanced clinical skills/behaviors that are essential for undergraduate nursing students to master;provide resources that will assist acquisition of clinical skills necessary for advanced practice roles;provide an ideal learning environment for supervised and independent practice, throughoutstudents' academic endeavors. Three different types of surrogacy are currently used in clinical teaching: human, mechanical,and virtual. Each has relative advantages and disadvantages that should be considered in the process of planning simulation-based training programs. Human simulation uses a trained role-player to act the part of a patient with a specific medical condition. Mechanical simulation allows students to use mock (i.e., artificial) parts adequately mimicking the experience that would be gained from interacting with a real patient's body, organs, or tissues. Virtual simulation employs the latest advances in computer technology and visual interfaces to create acceptably realistic learning experiences. Simulation deserves to have a strong future in health care, if for no other reason than filling the worrisome gap between a declining number of teachers and a growing number of students in the health professions for the maintenance of licensure and certification programs.

P28

ASSESSING LAST YEAR MEDICAL STUDENTS ATTITUDE TOWARD INTERPROFES- SIONAL LEARNING

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Background: Interprofessional Learning (IPL), is a crucial factor in preparing health professionals to render efficient patient care within collaborative care environments. The readiness of medical students to take part in IPE will promote interprofessional activities. Moreover, considering IPL in curriculum of medicine positively impacts the future of health care systems thus it is very important to obtain patients safety.

Aim: To determine last year medical students level of attitude toward IPL by the use of Readiness of InterProfessional Learning Scale (RIPLS) questionnaire.

Method: This was cross sectional study. The study population was 100 of last year medical students of Tehran University of Medical Students (TUMS). 64 percent of them were male. The level of sampling was available samples. The level of attitude was asked by the RIPLS questionnaire. Validity of the questionnaire in Iranian contexts was proved in previous study.

Results: Scores were analyzed in 4 different subscales. In Teamwork & Collaboration subscale (questions number 1-9), the average score was 3.83. In Negative Professional Identity subscale (questions number 10-12), the average score was 3.30 (reverse scored). In Positive Professional Identity subscale (questions number 13-16), the average score was 3.70. In Roles & Responsibilities subscale (questions number 17-19), the average score was 3.24. The average total score was 3.66. There was no significant gender difference in total scores.

SOCIAL PROGRAMME

Guided Walking Tour through Hamamönü and Ulucanlar Prison

18 November 2012, 10:00-13:30



Hamamönü, the district of historical Ankara houses in the surrounding neighborhood of Hacettepe University had been restored by Altındağ Municipality, and became an attraction point for national and international travellers. With the historical houses and streets, it demonstrates an historical travel. The mansions in which bureaucrats, artists and poets used to live in, smiles you with its restored faces: Kamil Pasha, Beynamlızade, and Historical Kabakçı. You can also visit the historical mosques in the region: Hacı Musa, Tacettin Sultan, Karacabey and Sarıkadi.



Ulucanlar Prison was the place where many people were kept, tortured and executed in the past; now a museum. It was built in 1925. It had been used as a prison for 81 years. Many journalists, politicians, poets and authors stayed there in the past. After the restoration by Altındağ Municipality, it has reopened as a museum since 2011.

ENDORSEERS



ASSOCIATION OF STANDARDIZED PATIENT EDUCATORS

ASPE is the international organization for professionals in the field of simulated and standardized patient methodology.

ASPE is dedicated to:

- Professional growth and development of its members
- Advancement of simulated and standardized patient research and related scholarly activities
- Setting standards of practice
- Fostering patient centered care

The Association of Standardized Patients Educators was formed in 1991. Since that time, our membership has grown along with the concept of standardized patients. Its use has expanded into many fields including dentistry, pharmacy, veterinary medicine, and allied health professions. SP scenarios often involve simulators or manikins which has fostered an affiliation with the Society for Simulation in Healthcare. Out of SP methodology scholarship has grown an affiliation with MedEd Portal, the source of SP cases that have been vetted and validated by SP educators. We welcome all who are interested in this exciting, ever changing, ever growing field.



SOCIETY IN EUROPE FOR SIMULATION APPLIED TO MEDICINE

SESAM is a multiprofessional network of simulation enthusiasts in Europe.

The purpose of SESAM is:

- The development and application of simulation in education, research and quality management in medicine and health care.
- Facilitation, exchange and improvement of the technology and knowledge throughout Europe.
- Establishment of combined research facilities.

SESAM was founded in Copenhagen in August 1994. Our Mission is to encourage and support the use of simulation in medicine for the purpose of training and research. We are not affiliated to any medical or other speciality. Members are physicians and nurses from several specialties, technicians, engineers, psychologists, physicists, biologists... If you are using simulation techniques or are considering to do so please join SESAM and become a member of its mailing list. This will bring you in contact with international protagonists of simulation.



EXHIBITORS



ERTUNÇ ÖZCAN

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We have focused on the part task trainer models that can be used with standardized/simulated patients for the last few years.

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