

## IN PRACTICE

A97

**UNLOCKING THE POTENTIAL OF IMG DOCTORS: BESPOKE SIMULATION-BASED EDUCATION**Rachel Cichosz<sup>1</sup>, Harjinder Kainth<sup>1</sup>; <sup>1</sup>Royal Wolverhampton NHS TrustCorrespondence: [rachel.cichosz@doctors.org.uk](mailto:rachel.cichosz@doctors.org.uk)

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**Introduction:** International Medical Graduates (IMGs) comprise 50% of all new doctors joining the UK medical workforce [1]. IMG doctors joining the foundation programme or working as Locally Employed Doctors, or Clinical Fellows, bring a wealth of knowledge and experience. Tailoring educational courses to address non-technical skills related to adapting to the NHS and understanding different cultures can help to maximise individuals' potential and performance, and reduce differential attainment [2].

**Methods:** Following incident report and learning needs analyses, which highlighted issues concerning IMGs, a bespoke simulation-based education (SBE) course aimed at FY1 doctors and Clinical Fellows was developed by an experienced faculty. Qualitative and quantitative data was collected in the form of pre and post courses surveys, in order to assess impact and inform future courses. Qualitative data underwent thematic analysis by two individuals. Quantitative Ordinal Likert scale data was converted into continuous data and analysed using non-parametric statistical tests. Further data was collected '1 year on' to assess longer term educational benefit and was analysed in the same way.

**Results:** A total of 44 IMGs participated in our bespoke courses. Having recently moved to the UK to work in the NHS, these doctors' primary medical qualifications were from a variety of countries, with very little exposure to SBE in their previous training. A significant difference in pre and post course ratings of knowledge of the human factors, non-technical skills and the role of debriefing was demonstrated, as well as confidence ratings across a range of skills (Table 1-A97). Key themes identified via thematic analysis include 'I learned a lot' and 'extremely useful'. The participants themselves have recommended that all IMGs new to the NHS should be offered such SBE training. And some suggest it should, in fact, be mandatory. Data collected to assess longer term educational benefit is a work in progress, however initial data is positive.

**Discussion:** IMG doctors have a unique training need, in that they have many years of clinical experience, but have translocated to a new healthcare system, posing them with human factors and non-technical challenges that they have not previously experienced. These issues can be readily explored through a bespoke SBE programme that provides a physically and psychologically safe environment. This research will inform future development of our courses aimed at IMGs and we hope to share with other centres to develop best practice guidance.

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

## REFERENCES

1. GMC. The Workforce Report. 2022. Available from: [https://www.gmc-uk.org/-/media/documents/workforce-report-2022---full-report\\_pdf-94540077.pdf](https://www.gmc-uk.org/-/media/documents/workforce-report-2022---full-report_pdf-94540077.pdf). [Accessed 27 November 2023].
2. Differential Attainment Toolkit | London (hee.nhs.uk) [Accessed 27 November 2023].



Table 1-A97.

	Pre course average score FY1	Post course average score FY1	P-value	Pre course average score CF	Post course average score CF	P-Value
Assessing the acutely unwell patient	3.67	4.33	0.064	3.93	4.36	0.046
Structured handover	3.83	4.67	0.023	3.79	4.64	0.007
Being assertive	3.67	4.5	0.033	3.64	4.21	0.046
Communicating with patients and relatives	4	4.5	0.087	3.79	4.29	0.064
Communicating with colleagues	4.17	4.67	0.087	4.07	4.5	0.078
Breaking bad news	3.5	4.33	0.033	3.36	4.29	0.007
Escalation of treatment	3.5	4.17	0.055	3.79	4.64	0.007
Mental Capacity	3.17	4	0.055	3.56	4.36	0.011