



NATIONAL  
DOCTORS  
TRAINING  
& PLANNING

# Development Funding 2024-2025 Cycle



## Abstract Booklet













## Table of Contents

|                                                   |    |
|---------------------------------------------------|----|
| Development Funding Cycle Project Summaries ..... | 2  |
| Project Abstract 1: 02RCSI .....                  | 4  |
| Project Abstract 2: 07RAD .....                   | 5  |
| Project Abstract 3: 08RAD .....                   | 6  |
| Project Abstract 4: 09RCPI .....                  | 8  |
| Project Abstract 5: 13RCPI .....                  | 9  |
| Project Abstract 6: 13UCD .....                   | 10 |
| Project Abstract 7: 15RCPI .....                  | 11 |
| Project Abstract 8: 16RCPI .....                  | 12 |
| Project Abstract 9: 17RCPI .....                  | 15 |
| Project Abstract 10: 18RCPI .....                 | 16 |
| Project Abstract 11: 19RCPI .....                 | 18 |
| Project Abstract 12: 24RCSI .....                 | 20 |
| Project Abstract 13: 26RCSI .....                 | 22 |
| Project Abstract 14: 27RCSI .....                 | 25 |
| Project Abstract 15: 28COPI .....                 | 28 |
| Project Abstract 16: 29COPI .....                 | 29 |



# DEVELOPMENT FUNDING 2024-2025 CYCLE

## PROJECT SUMMARIES

### **1. Royal College of Surgeons in Ireland (RCSI)**

Being Fair: Supporting healthcare professionals with a just and learning culture

### **2. Faculty of Radiologists and Radiation Oncologists of the Royal College of Surgeons in Ireland (RCSI)**

Simulation using Virtual Reality for Radiation Protection training

### **3. Faculty of Radiologists and Radiation Oncologists of the Royal College of Surgeons in Ireland (RCSI)**

Interactive eLearning Radiation Oncology Medical Education

### **4. Royal College of Physicians of Ireland (RCPI)**

The adoption of situational judgement testing as a selection and ranking methodology for entry onto Postgraduate Medical Training (BST and HST), RCPI

### **5. Royal College of Physicians of Ireland (RCPI)**

The development of a new online e-learning platform for Obstetrics and Gynaecology

### **6. IEHG/UCD Intern Simulation Committee**

LEVEL UP: Mastering Procedures with Simulation and Experiential Learning

### **7. Royal College of Physicians of Ireland (RCPI)**

Early Skills Development in Bronchoscopy

### **8. Royal College of Physicians of Ireland (RCPI)**

The Development of an Educational Training Programme in Neonatology and Neonatal Intubation

# DEVELOPMENT FUNDING 2024-2025 CYCLE

## PROJECT SUMMARIES

### **9. Royal College of Physicians of Ireland (RCPI)**

Review and Enhancement of Paediatric Procedural Skills Training for Early Career Paediatrics Trainees

### **10. Royal College of Physicians of Ireland (RCPI)**

Building an Education Framework for Inclusion Health in Postgraduate Medical Training

### **11. Royal College of Physicians of Ireland (RCPI)**

Developing a Community of Practice for Irish Clinician Educators

### **12. Royal College of Surgeons in Ireland (RCSI)**

Powering Down the Operating Theatre - Simulation Surgical Team Training in Green Sustainable Surgical Practice

### **13. Royal College of Surgeons in Ireland (RCSI)**

A Bespoke Personal Wellbeing Improvement Project for Emergency Medicine Doctors in Training

### **14. Royal College of Surgeons in Ireland (RCSI)**

EmeraldSIM

### **15. The College of Psychiatrists of Ireland (COPI)**

Subspecialty seminars for higher specialist trainees in psychiatry

### **16. The College of Psychiatrists of Ireland (COPI)**

Development of EPAS across the specialties of Psychiatry



## Project Abstract 1:02RCSI

► **Project Title: Being Fair: Supporting Healthcare Professionals with a Just and Learning Culture**

► **Lead Agency: Alexandra St John, RCSI Online, Royal College of Surgeons in Ireland**

### Abstract

RCSI Online, with funding support from the HSE NDTP Development Fund, has developed Being Fair: A Just Culture in Healthcare, a free short course designed to raise awareness and foster understanding of Just Culture principles among healthcare professionals. This initiative aims to support a shift away from blame and towards learning, openness, and accountability following patient safety incidents.

The course was developed through a structured, multi-phase process. It began with a review of international literature on Just Culture in healthcare, which informed the course content. Subject matter experts and instructional designers then collaborated to design and build the course, integrating evidence-based frameworks and best practices. A pilot testing and refinement phase was carried out to ensure the content was relevant, accessible, and engaging for a broad audience of healthcare professionals.

Originally scheduled for launch in March 2025, the course has been developed in a revised format and will officially launch in September 2025. Two key developments influenced this updated timeline. First, the delivery platform was changed during development to expand access: rather than using a login-restricted institutional VLE, the course is now built using tools such as H5P, Gamma, and HTML5, allowing healthcare professionals to access it freely without institutional credentials. Second, the course has been submitted for CPD recognition via RCSI's internal accreditation process, with approval expected in early September 2025. The addition of formal CPD points is expected to significantly enhance the course's uptake and relevance.

The course content includes video explainers, interactive scenarios, and reflection activities that explore how individuals and organisations can respond fairly and constructively when things go wrong. Learners are introduced to the key principles and behaviours of a Just Culture, the impact of blame culture on staff and patients, and the importance of psychological safety in improving incident reporting and learning outcomes.

Evaluation will focus on short-term indicators such as course registrations, completion rates, knowledge gain, and user feedback, with longer-term outcomes assessed through follow-up surveys post-launch. The course aligns with the HSE Patient Safety Strategy (2019–2024) and the Incident Management Framework (2020), and supports broader efforts such as After Action Review and the iCAARE study. It is designed as a scalable, asynchronous resource that can either supplement or precede in-person training.

By making this resource freely available and CPD-accredited, RCSI Online aims to contribute meaningfully to a national movement toward safer, fairer healthcare systems and support professionals in managing complex incidents with compassion, accountability and learning at the core.

## Project Abstract 2:07RAD

- ▶ **Project Title: Simulation using Virtual Reality for Radiation Protection training**
- ▶ **Lead Agency: Royal College of Surgeons in Ireland (RCSI)**

### Abstract

**Purpose;** Virtual Reality (VR) apps can vastly improve access of learners to practice radiation protection behaviours. Implementing virtual reality training, allows real time feedback to the learner of the effect of implementation of these behaviours on patient and physician radiation dose in a low-risk environment. In this study, we developed a VR radiation protection training module and compare the change in radiation dose and protection behaviours in a group of radiologists to a group of radiologists who have not been exposed to VR.

**Materials and Methods;** Baseline physician radiation exposure measurements were obtained in the interventional radiology suite using personal dose meters (PDM, DoseAware, Philips). PDMs were utilised to record ceiling hung lead screen usage in the study period. Randomly selected year 1 to 4 resident and attending radiologists were assigned to receive one hour of VR training in radiation protection using a virtual reality app that replicates the interventional radiology suite (Northdocks GmbH). After VR training, personal dose and screen utilisation data was collected and comparative statistics generated.

**Results;** 22 Radiologists were enrolled. 11 radiologists completed VR training. Personal radiation dose ( $P < 0.05$ ) in the baseline, and no VR training groups was not significantly higher than the VR training group. Lead screen usage was 31, 40 and 82% in the baseline, no VR training and VR training groups respectively ( $P < 0.05$ ). Lead screen usage was significantly increased by VR training. VR training was associated with 20% (range 10-30%) lower physician radiation doses when compared to baseline for reference procedures such a PICC insertion ( $P < 0.05$ ).

**Conclusion.** VR radiation training is associated with significantly lower physician radiation dose and improved radiation protection behaviours.

A Clinical Relevance statement, not to exceed 200 characters, is also required. 162

Radiation Protection training using a virtual reality app significantly reduces physician radiation dose and increases radiation protection behaviours in real life.

For review purposes only, it is recommended that a figure to support your work accompany your submission [figure must be captured in a single .jpg file and is limited to an image(s)]



## Project Abstract 3: 08RAD

► **Project Title: Interactive eLearning Radiation Oncology Medical Education**

► **Lead Agency: The Faculty of Radiologists and Radiation Oncologists, RCSI**

### **Abstract**

#### Measuring Success – Purpose and Goals

This study describes the development of radiation oncology eLearning online education modules with multimedia and interactive capabilities which may provide a solution to further integrating radiation oncology education into the medical undergraduate curriculum. The ADDIE framework comprising of five stages: Analysis, Design, Development, Implementation, and Evaluation was used.

#### Analysis

A specialist taskforce including radiation oncologists and clinical oncologists with a special interest in education, the university Dean of the Faculty of Radiation Oncologists and Radiologists, the National Training Co-Ordinator for radiation oncology specialist training, radiation oncology specialist registrar trainees, educational methodology experts and online learning specialists agreed on the content of two interactive eLearning Radiation Oncology modules tailored to the needs of undergraduate medical students.

#### Learning Objectives agreed

Module 1 – 100% complete

Module 2 – 100% complete

#### Design

A full written transcript has been developed by clinicians for both modules and revised multiple times. A clinician review forum was undertaken Q2 2025. Transcripts were finalised. A number of clinicians agreed to be actors in videos to be embedded in the modules. A decision was made to invite a patient representative to be an actor also.

Agreement on transcripts/content

Module 1 - 100% complete

Module 2 – 100% complete

## Development

The content for each module was translated into interactive formats using Articulate Storyline 360, a leading authoring tool in eLearning design providing a platform that allows for robust multimedia integration and accessibility. To support engagement and retention, both modules incorporate a variety of interactive features, including video scenarios, simulations, instructional games, and self-assessment tools.

Development of Modules with multimedia and interactivity capabilities

Module 1 - 60% complete, videos yet to be embedded in module

Module 2 - 80% complete, videos yet to be embedded in module

Student review Form – contribute to development ideas, feedback.

Students forum meeting pending Q4 2025

## Implementation

The final modules will be deployed on a Virtual Learning Environment (VLE), allowing for easy access, tracking of learner progress, and future updates.

- Launch education sessions online through the Faculty of Radiologists and Radiation Oncologists
- Provision open access Radiation Oncology Medical Education
- Online Promotional Campaign

## Evaluation

By deploying the modules as SCORM (Sharable Content Object Reference Model) packages within our Virtual Learning Environment (VLE), we can capture detailed usage and performance data to assess effectiveness and guide iterative improvements.

| Indicators                                                             | Measurement                                                                                                                                                                                  |
|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Individual Participation                                               | Measure when individuals enter the module and how long they spend in the module.                                                                                                             |
| Number of Participants                                                 | The VLE can see how many have participated.                                                                                                                                                  |
| Which pages are popular or reviewed or elements e.g. videos are viewed | Content can be developed further if certain elements of the module are viewed multiple times or if there is feedback for more or less content.                                               |
| Graded Quizzes                                                         | The quizzes are formative but they are graded for feedback purposes and the number of times a learner attempts a quiz will be logged whether they success in achieving the pass rate or not. |
| Completion Cert                                                        | A completion cert can measure the successful completion of the module.                                                                                                                       |

## Project Abstract 4:09RCPI

- ▶ **Project Title:** The adoption of situational judgement testing as a selection and methodology for entry onto Postgraduate Medical Training (BST and HST), RCPI.
- ▶ **Lead Agency:** Royal College of Physicians of Ireland (RCPI)

### Abstract

The Royal College of Physicians of Ireland (RCPI), undertook a pilot initiative to consider the application of Situational Judgement Testing (SJT) into the recruitment and selection process for postgraduate medical training. This project was part-funded under the HSE-NDTP Development Funding 2024 scheme and aimed to address the growing challenges in shortlisting and ranking candidates for Basic Specialist Training (BST) and Higher Specialist Training (HST) programmes. With increasing applicant volumes and clinician availability for interviews, the traditional selection process was becoming unsustainable and insufficient in evaluating the full spectrum of candidate competencies.

SJT offers a standardized, evidence-based method to assess non-academic attributes such as professionalism, ethical reasoning, communication, and decision-making. The project focused on developing a tailored SJT model for RCPI, beginning with a thorough needs assessment and literature review to allow RCPI to move through a development model that would commence the process to eventually embed SJT across the 34 intake pathways at BST and HST.

Implementation included a review of the current shortlisting modalities and a comparative to how SJT would improve the current selection process, ensuring fairness and transparency for applicants. The outcomes indicated that the application of the SJT model would deliver a reduction in interview days, improved fairness and transparency in candidate assessment, and a more diverse and professionally prepared applicant pool. The project also benchmarked a standardized scoring rubric and testing methodology underpinning SJT, which can be used to support future recruitment cycles.

The launch of SJT across all 34 pathways would require a significant body of work for RCPI and training programme clinical leadership. Sustainability is now under consideration in phase two and avenues such as the application of an assessment fee and scalable content development strategies are being examined. This initiative, if delivered long term, will align RCPI with international best practices and enhancing the quality and equity of postgraduate medical training selection. The project has demonstrated clear value for money, measurable impact, and long-term potential to transform recruitment processes across the healthcare system.



## Project Abstract 5: 13RCPI

► **Project Title:** The development of a new online e-learning platform for Obstetrics and Gynaecology

► **Lead Agency:** IOG, Royal College of Physicians of Ireland (RCPI)  
**Abstract**

The primary goal of this two year project is to provide an online education platform of short multi-media modules providing the theoretical basis to contemporary obstetric care. Currently trainees in the United Kingdom can access similar resources via the Royal College of Obstetricians and Gynaecologists e-learning platform with over 300 modules available. However, for Irish trainees that e-learning platform has a payment barrier of £40 per module.[1]

By developing our own National online learning platform Irish Obstetrics and Gynaecology trainees will have an equitable theoretical resource, mapped to our new curricula, which can be accessed remotely at their own pace and periodically reviewed when required. Some of these online modules are utilised to support a blended learning format, which may enable improved attendance by our non-scheme trainees. By improving the educational supports available to our both trainees not in formal training schemes and our international East, Central and Southern African College of Obstetrics and Gynaecology trainees we can honour our ethical commitment to global health as outlined in the strategic framework.[2]

As we approach the midway point of this two year project eleven of 45 identified new online modules are available for trainees in Obstetrics & Gynaecology. Selected modules will be offered for free to any learner with other modules accessible to external learners for a fee. Learners are requested to complete a RCPI standard post course survey and evaluation reports will be provided to the course education specialist twice annually. External learners will have a CPD certificate to upload to their own CPD portfolio.

Free to all learners:

1. A Career in O&G in Ireland – training pathways and tips for success
2. Structure of the health services and role of national organisations
3. Early recognition of the deteriorating obstetric patient
4. SATU (Sexual assault treatment unit)
5. Breastfeeding common complications and advice
6. Termination in pregnancy (covering current legal framework, conscientious objections and complications following treatment)
7. Perinatal mortality

The mid-point evaluation of the initial new content by achieved by surveying trainees. This has been overwhelmingly positive with 100% positively reporting on accessibility, appropriate content with clinical applications to their practice. While it is too early to assess success of all modules the initial feedback indicates high relevance and satisfaction among trainees. The Institute of Obstetrics and Gynaecology within RCPI hope to further build on this platform continuing to improve the educational landscape for all trainees working within our speciality in Ireland.

1. <https://elearning.rcog.org.uk/catalog?pagename=All-Courses>
2. A STRATEGIC FRAMEWORK FOR POSTGRADUATE MEDICAL TRAINING IN IRELAND 2021-2030

## Project Abstract 6: 13UCD

- ▶ **Project Title: LEVEL UP: Mastering Procedures with Simulation and Experiential Learning**
- ▶ **Lead Agency: IEHG/UCD Intern Simulation Committee**

### Abstract

This NDTP Development Funding Project was delivered across UCD intern training sites, including the Mater Misericordiae University Hospital and St Vincent's University Hospital, between September 2024 and June 2025. The initiative was guided by the National Strategic Guide for the Implementation of Simulation on Clinical Sites (University of Galway, 2023).

The aim of the project was to deliver a structured simulation training programme focused on on-call clinical skills, with three thematic areas: (1) Cardiac Emergencies and ECG Interpretation, (2) Sepsis, and (3) the Deteriorating Patient.

Pre-delivery surveys revealed that UCD interns generally lacked confidence in managing acutely unwell patients, with most rating themselves as "Not Confident" to "Moderately Confident." Post-delivery surveys demonstrated marked improvement: over 85% of interns reported enjoying the workshops, and more than 90% agreed that the training enhanced their clinical capability and relevance to practice. Interns cited increased confidence in recognising and responding to clinical deterioration, applying structured protocols (e.g., INEWS and Sepsis Six), and escalating appropriately demonstrating alignment with intern learning needs and Entrustable Professional Activity 4 (EPA 4).

A multi-layered cohort of doctors benefited from the programme, including NCHD simulation leads, who were empowered to bring these skills into their clinical teams. Despite challenges with service demands and limited protected teaching time, the simulation leads successfully delivered high-quality training with positive engagement across the two main teaching sites. Awareness of simulation training has increased, and accompanying e-learning content was developed to support future intern cohorts.

The outcomes of this project support its sustainability and demonstrate its contribution to the transition from a time-based to a competency-based model of medical internship. It provides a solid foundation for embedding simulation into EPA 4 delivery and makes a strong case for continued investment in simulation-based education at both local and national levels.

## Project Abstract 7: 15RCPI

- ▶ **Project Title: Early Skills Development in Bronchoscopy**
- ▶ **Lead Agency: Royal College of Physicians of Ireland (RCPI)**

### Abstract

The aim of the Early Skills Development in Bronchoscopy project is to develop a one-day Bronchoscopy simulation course as a tool for onboarding doctors starting a career in respiratory medicine or returning to a bronchoscopy case load following a significant absence.

Building on the success of the Bronchoscopy Study Day (which has been delivered in Beaumont Hospital/RCSI annually since 2022), the initiative focuses on ensuring Trainees in Respiratory Medicine are equipped with foundational bronchoscopy skills early in their training.

The Bronchoscopy Study Day took place in September 2024 and was attended by 14 of 18 Year 1 HST Respiratory Medicine Trainees. Following observation and analysis of the Study Day, a training needs analysis and literature review were undertaken by the Education Specialist, and learning outcomes were identified and discussed with the Clinical Leads in November 2024.

The establishment of a one-day mandatory Early Skills Bronchoscopy course has received strong endorsement from the National Specialty Directors (NSDs) for Respiratory Medicine, who recognise it as a critical response to an identified gap in early skills for new Trainees. As a result, the course is being integrated as a mandatory component of the HST Respiratory Medicine programme, with updates to the national curriculum to be implemented for July 2025 publication.

While discussions initially considered the feasibility of a blended learning format, consensus among Clinical Leads remains in favour of a fully in-person, simulation-based model. Future iterations of the course are planned for September 2025 and September 2026 using existing funding. However, sustained delivery beyond 2026 depends on securing long-term financial support, with multiple avenues currently being explored.

Although proposals to expand the course into advanced modules for senior Trainees and consultants were discussed, these developments are paused due to current budget constraints. Evaluation metrics for the project include utilising feedback from both Trainees and Trainers to ensure continuous improvement and alignment with Outcome Based Education.

The project is on track for completion in July 2025, with collaboration to remain ongoing between the RCPI Training, Education & Lifelong Learning Department and RCPI Operations Department along with the Clinical Leads to secure funding for continued delivery of Early Skills Bronchoscopy.

## Project Abstract 8: 16RCPI

► **Project Title: The Development of an Educational Training Programme in Neonatology and Neonatal Intubation**

► **Lead Agency: Royal College of Physicians of Ireland (RCPI)**

### Abstract

The aims of the project are to:

- Define the training needs of neonatal registrars through needs assessments
- Develop a new training package for neonatal intubation including laryngoscopy, 3D printed neonatal airways, intubation feedback tool, intubation skills model
- Develop a series of neonatal simulations
- Trainees register and commence post graduate degrees (medical doctorate and master's in simulation)
- Develop an eLearning hub/virtual NICU

Project work is being conducted by clinical representatives from Neonatology within the National Maternity Hospital (NMH) with support from the RCPI Workplace Education Team.

Needs assessment survey disseminated Sept-Nov 2024. Two components Simulation education in Neonatology, 181 responses.

### Findings:

90% respondents had <5 years' experience in NICU  
 95% have received simulation training  
 45% weekly, 55% less frequently  
 50% report sim training offered does not meet requirements  
 68% report time/clinical work is greatest barrier  
 29% report fear of embarrassment  
 98% ask for protected time for sim training

Neonatal airway teaching experiences and preferences with a focus on video laryngoscopy.  
 154 doctors/ ANNP responses.

### Findings:

70%: access to a video laryngoscope (VL)  
 24% : the most often used device in their dept  
 34% have never used VL Experience being trained in intubation:  
 22% "see one, do one, teach one"  
 8% had no structured training,  
 46% formal manikin teaching  
 98.8% think more structured teaching of neonatal intubation would be of benefit



## 1. The NINJA study- RCT

Neonatal Intubation: a Just-in-time Audiovisual Training

- Study designed by research team
- HREC approval NMH Sept 2024
- Protocol written and reviewed by statistician Feb 2025
- Target sample size 140 intubations
- Clinicaltrials.gov approval March 2025
- Just-in-time intervention video created and edited; final version completed April 2025
- Recruitment commenced 30th April 2025
- Current recruitment: 20 (ahead of projected enrolment 5/month)

## 1. NeoSeal RCT

Neonatal Mask Seal; a randomised controlled trial of two-handed versus one-handed hold for delivering positive pressure ventilation with a facemask in preterm and term infants.

- Study designed by research team
- HREC approval NMH Sept 2024
- Protocol written and reviewed by statistician Oct-Nov 2024
- Equipment acquired and piloted Dec 2024

Pre-study training programme completed Jan 2025 40 participants. Formal training in two-handed mask hold and refresher training in one-handed mask hold to ensure adequate technique prior to commencing study.

Study recruitment commenced 27th Jan 2025

Target sample size 110

Current recruitment: 45 participants (ahead of projected enrolment 5/month)

## 1. NeoAir course

Several paediatricians expressed an interest in attending a course ran by tertiary neonatologists on neonatal airway and ventilation management. Recent survey data as outlined above has demonstrated that the majority of level 1 and 2 neonatal units have access to video laryngoscopy however they are not comfortable with using this technology regularly. This research group set out to create, develop and run a hands-on course for paediatricians working in non-tertiary units on neonatal intubation, video laryngoscopy and ventilation. The course content was developed by Drs Anna Curley, Eoin O' Currain, Elizabeth Murphy and Laura Ryan. Administration and organisation were carried out by the research team. Each member of the group researched and presented content across the 2-day course. Learning was facilitated through lectures, small group practical sessions and a simulation session. There was additional focus on training the trainer to supervise and teach intubation to NCHDs. The course was advertised with the support of the RCPI and through contacts at individual hospitals. The pilot "NeoAir" course was held over 2 days in Dublin on 22nd and 23rd February. 13 Consultant Paediatricians attended. Feedback surveys were sought from delegates and the feedback was overwhelmingly positive. The next steps for the NeoAir group will be to run a 1-day version of the hands-on course open to registrars and another course directed towards nurses. These will be held in autumn/winter 2025.

## Micro-Sims

Shortened, tailored simulated events to accommodate more efficient simulation-based education with increased participation, developed based on the reported barriers from the needs assessment.

Style of simulation was developed by the research team Varied list of scenarios written, with expert input. Developed into shortened events for simulation-based education (5-9 mins).

MicroSims piloted during the NeoAir course, with very positive feedback from the participants Currently: Ongoing project to assess MicroSims as an educational intervention. Ongoing projects using MicroSim as a more realistic alternative to benchtop manikin studies for assessing resuscitation techniques.

Both medical and nursing participants to date have given very positive feedback, rating this style of simulation very highly as it overcomes the reported barriers. Continued recruitment before and after changeover aims to recruit high numbers of participants for above studies.

E-Learning/ Educational video development neonatal mask ventilation and airway management including LMA insertion and set up for intubation and team preparation. Focus to date has been on development of content. Lecture content from NeoAir has been presented to group of consultants and feedback has been sought. Lecture content can be adapted for online learning format. Additional content derived from cross over with another project for umbilical line insertion training funded by HSE Sparks initiative. In collaboration with this project, videography company employed by research group to film and edit instructional videos on: Filming carried out on 17th June and currently editing is underway. These educational videos can be adapted for an online platform. If these pilot topics are successful, future video content **can** be developed. Additional educational videos have been developed by the research team. The "just-in-time" intervention video for the NINJA study was created and edited. This video will be validated through the NINJA study and feedback being collected as part of the study. A detailed educational video has been developed on the technique of video laryngoscopy, highlighting the differences with direct laryngoscopy to aid those adopting this new technique. This is highly relevant at a time when there is a drive to increase uptake of video laryngoscopy to reflect the increased success rates being demonstrated in other studies. Online learning content around intubation will be a beneficial adjunct to future NeoAir courses. To do: Engage and confirm hosting of online content- potential for RCPI hosting of online material, similar set up to "Paediatric Pocket Tutorials".

## Project Abstract 9: 17RCPI

- ▶ **Project Title: Review and Enhancement of Paediatric Procedural Skills Training for Early Career Paediatrics Trainees**
- ▶ **Lead Agency: Royal College of Physicians of Ireland (RCPI)**

### Abstract

The aims of the project are to:

- Complete a needs analysis of paediatric procedural skills training and update course content.
- Realign practical skills teaching to updated training goals in Basic Specialist Training in Paediatrics.
- Increase accuracy of skills training through the use of paediatric-sized mannequins, in particular for lumbar puncture and PICC line insertion.
- Review and update the Paediatric Procedural Skills course in the context of best practice in simulation.

The selection of the appropriate simulators and procurement were completed. Logistics were confirmed and storage of course equipment, and the requirement for PICC Line and Lumbar Puncture equipment was confirmed with the Clinical Lead. An agreement was established with RCSI that storage at RCSI and insurance will be covered by the RCPI course budget. This agreement will be in place until May 2026 when all details will be reviewed.

## Project Abstract 10: 18RCPI

► **Project Title:** Building an Education Framework for Inclusion Health in Postgraduate Medical Training

► **Lead Agency:** Royal College of Physicians of Ireland (RCPI)

### Abstract

The purpose of this project is to design an Education Framework on Inclusion Health. The focus of this Framework is on identifying the capabilities required by doctors to address health inequities faced by people experiencing social exclusion and to work towards achieving health outcomes equivalent to those of the general population. This Framework will outline teaching and learning goals that specify the clinical skills underpinning the delivery of effective, responsive care; it will also serve as a foundation for designing clinical fellowships, special interest pathways, curricula within National Training Programmes, and other educational resources.

Initial planning began in July 2024, including a workshop with the Project Team to identify priority themes, agree on intended outcomes, and define the scope of the Education Framework. This was followed by a meeting in October 2024 to confirm the project structure, definitions, expectations, and the co-design approach. A comprehensive stakeholder engagement plan and workshopping process were agreed, and a full stakeholder list was reviewed and confirmed.

A communications plan was developed and launched in November 2024, targeting three key groups:

1. Inclusion Medicine Working Group – tasked with advising, drafting, and signing-off on Framework content.
2. Co-Design Partners – comprising affected community members, representative organisations, trainees, and committee members who attend workshops, provide feedback, and contribute to content writing.
3. Impacted Stakeholders – informed and updated throughout the process, though not directly involved in content development.

Introductory workshops for the Co-Design Partners and Inclusion Medicine Working Group were held in January 2025. Co-design tools, including guides for one-to-one semi-structured interviews and workshops, were developed in January 2025, informed by the literature review, stakeholder priorities, and initial scoping discussions with the Project Team. Interviews in February 2025 with representatives from Co-Design Partner organisations generated thematic insights, which were explored further through targeted workshops in March and April 2025. These workshops facilitated the sharing of real-world insights and experiences among community participants, enabling collaboration on Inclusion Health goals through facilitated discussion. Thematic outcomes and priority learning areas were identified through an analysis and synthesis of participant contributions. Concurrently, a workshop with the Inclusion Medicine Working Group explored clinical service priorities and needs, contributing to the development of targeted, practice-informed content for the Framework.



The Framework's structural outline, section titles, and core training outcomes have been agreed, with drafting responsibilities assigned to Project Team members, Co-Design Partners, and Working Group contributors. Ongoing tasks include cross-Training Body consultation and a review of RCPI Core Professional Skills requirements to inform the draft.

A joint workshop in late July 2025 will bring Co-Design Partners and the Inclusion Medicine Working Group together to consolidate feedback and clarify core learning goals for the first full Framework draft, targeted for completion by the end of July 2025. Iterative refinement and consultation will continue through August, with the final draft expected by the end of September 2025.

The Education Framework is scheduled for publication in October 2025, with a formal Launch and Awareness Event planned for late 2025 or early 2026.

## Project Abstract 11: 19RCPI

► **Project Title: Developing a Community of Practice for Irish Clinician Educators**

► **Lead Agency: Royal College of Physicians of Ireland (RCPI)**

### Abstract

The Developing a Community of Practice for Irish Clinician Educators project supports the continued development of the Irish Clinician Educator Training (ICET) Programme through the structured delivery of learning modules and supervisor upskilling initiatives.

The aims of the project are:

- Recruitment and development of new and returning ICET Supervisors
- Structured learning cycle and Workshop delivery including Induction Event
- Develop and disseminate a comprehensive description outlining the learning modules
- Effective promotion and future planning

A series of monthly workshops for ICET Trainees and Supervisors was delivered from September 2024 to May 2025. ICET Workshops aim to integrate the theoretical aspects of clinical education with the contextualised experiences of different medical educators and other professionals in the field.

In addition to the ICET Workshops, the “Becoming a Clinical Educator” course, delivered by the University of Oxford, was attended by ICET Trainees and Supervisors in November 2024 with positive feedback received. We liaised with the “Becoming a Clinical Educator” course directors the previous years to create a partnership with the goal of enhancing the teaching component of the ICET programme through the innovative approach brought forward by our Oxford colleagues.

The ICET Supervisor recruitment process was formalised and launched in April 2025 for the 2026/2027 recruitment cycle. This included surveys, webinars, and direct engagement with interested Trainers, resulting in the approval of two new ICET Posts for commencement in July 2026. A Trainer Expression of Interest survey and accompanying information sessions helped identify and support potential applicants.

A workshop on End of Year Evaluation (EYE) preparation was delivered to ICET Trainees and Supervisors in early May 2025, and EYEs were successfully conducted in late May 2025, with all participating Trainees progressing, and two set to complete the ICET Programme - the first Trainees to complete the programme since the pilot began in 2023.

Governance structures have been formalised, with approval of the programme framework and operational documentation now in progress. Documentation of the ICET Programme structure, processes and timelines will help ensure sustainability and facilitate a smooth operational handover upon project completion in July 2025. The development of an ICET landing page on the RCPI website is also underway, with rollout in June 2025 to enhance communication and outreach.

Continuing Trainer education modules have been developed using insights gained from the ICET Programme and are being refined into a formal Faculty Development Plan and upskilling programme for all Trainers to be launched at the RCPI Trainer Conference in November 2025. Additionally, a series of AI-focused workshops are planned (January-February 2026) in collaboration with the Institute of Medicine (IOM) to further enhance supervisor capability.

## Project Abstract 12: 24RCSI

► **Project Title: Powering Down the Operating Theatre - Simulation Surgical Team Training in Green Sustainable Surgical Practice**

► **Lead Agency: Royal College of Surgeons in Ireland (RCSI)**

### Abstract

#### Introduction

The impact of global warming on human health is profound and escalating. The Lancet Countdown on Health and Climate Change has identified climate change as the most significant threat to population health in the 21st century. In response, the Royal College of Surgeons in Ireland (RCSI), as both a University of Health Sciences and the accredited body for Postgraduate Surgical and Emergency Medicine training in Ireland, has taken proactive steps to address this challenge within the surgical profession.

#### Simulation-Based Training Programme

The RCSI developed a simulation-based training programme designed to upskill surgical multi-disciplinary teams in sustainable operating theatre practices. This includes making climate-conscious decisions within the operative environment and promoting 'Green Theatre' principles in day-to-day clinical practice.

#### Course Development and Preparation

Given the novel nature of the programme, several preparatory steps were undertaken:

1. **Ethical Approval:** An ethics application was submitted and approved to ensure that data gathered from the pilot course could be analysed, published, and shared to benefit a wider audience.
2. **Stakeholder Engagement:** Key stakeholders are being recruited to participate in the pilot course. This included identifying surgical professionals, senior nursing staff and those in a position to influence practice change in their local hospitals.
3. **Development of Online Modules:** A suite of online learning modules was created to serve both as pre-course preparatory material for in-person attendees and as standalone e-learning content for broader use in the future.

The modules cover the following topics:

- Prevention of Ill Health
- Patient Empowerment
- Lean Service Delivery
- Low-Carbon Alternatives
- Efficient Resource Use

These modules are designed to support long-term knowledge transfer and facilitate broader engagement with sustainability in surgery.

#### Course Delivery – In-Person Training

The in-person course will be delivered at the RCSI Simulation Centre, York Street, Dublin 2. It is structured as a "Train the Trainer" model, targeting individuals who are well-positioned to lead behavioural change within their clinical settings. Attendees will acquire practical tools and leadership skills to become sustainability champions within their operating theatres.

### Educational Impact and Call to Action

The programme concludes with a key message: Every Action Matters. Participants are encouraged to reflect on their role not just as clinicians but as stewards of sustainable healthcare. Practical steps—such as reducing waste, choosing low-carbon options, optimising theatre processes, and promoting a lean, efficient approach—can cumulatively lead to significant system-level improvements.

Participants are urged to:

- Advocate for greener practices within their hospitals.
- Educate peers and colleagues.
- Lead by example.
- Share innovations and collaborate on sustainable initiatives.

### Conclusion

The Sustainability Principles and Practice in Surgery initiative is a multifaceted programme comprising a pilot in-person course and scalable online educational content. This initiative places sustainability at the core of surgical practice and sets a precedent for how clinical education can drive environmental responsibility across the health sector. By equipping surgical professionals with the knowledge and tools to enact change, RCSI is embedding a culture of sustainability within the operating theatre environment across Ireland.



## Project Abstract 13: 26RCSI

► **Project Title: A Bespoke Personal Wellbeing Improvement Project for Emergency Medicine Doctors in Training**

► **Lead Agency: Royal College of Surgeons in Ireland (RCSI)**

### Abstract

The key objective of this project was to create a Peer Support Programme for NCHDs.

The first phase of this project was to fully complete the Ethics Application.

The appropriate Ethics application form submitted on 03/07/2024, returned 05/09/2024 with queries, Resubmitted and final ethics approval granted on 25/09/2024

The next phase of the project saw the following actions all completed:

1. Redesign of Whole Health Inventory for target audience
2. Online enrolment form designed, including recording of demographic data, OLBI calculation and informed consent
3. Online educational content – 8 online modules written and recorded by Dr Padraic Dunne
4. Arrangement to house online content on RCSI Moodle site
5. Branding of project –this included design and communication material
6. Registration on Clinicaltrials.gov website
7. Promoted to trainees:  
CSTEM trainees at CAPA – 28/11/24  
ASTEM trainees at Adare meeting – 9/12/24

### Phase Two: Work completed January – July 2025

The project was launched in January 2025 with communication going to all NEMTP trainees via email and mobile phone via trainee WhatsApp groups. It was also promoted via key social media sites (Instagram & X). The project was further promoted by Dr Una Kennedy during a presentation at the IEMTA Spring Scientific Meeting in RCSI in April 2025.

Trainees were invited to participate by completing an online consent form, at which stage access was given to course content on Moodle. Due to an initial slow update of the Programme, the enrolment cut-off date was extended to end-April 2025, and the project was promoted to the trainees again using the email, WhatsApp and social media. (As the project duration is 12-months, this later cut-off will delay the completion of the project to April 2026.)

Trainees are now (August 2025) being invited to complete the 6-month burnout score.

### Evaluation - Results to date:

As part of the evaluation of this project, the enrolment data is key and is outlined below:

50 (34%) of the 147 NEMTP trainees enrolled in the project

By Stage: 27 CSTEM, 23 ASTEM

By Gender: 30 Male, 20 Female

### The breakdown of trainees

| Training Level | Numbers Enrolled | Total Numbers in year | %   |
|----------------|------------------|-----------------------|-----|
| CSTEM Year 1   | 13               | 30                    | 43% |
| CSTEM Year 2   | 8                | 27                    | 30% |
| CSTEM Year 3   | 8                | 26                    | 31% |
| ASTEM Year 1   | 6                | 16                    | 38% |
| ASTEM Year 2   | 4                | 14                    | 29% |
| ASTEM Year 3   | 3                | 14                    | 21% |
| ASTEM Year 4   | 8                | 20                    | 40% |

#### Burnout score results:

Disengagement scale: 13-25, reflecting low to moderate disengagement in most trainees, with 1 score reflecting high levels of disengagement.

Exhaustion scale: 17-26, reflecting moderate exhaustion in most trainees. Of these, 1 score reflects high levels of exhaustion.

Of note, the one trainee who had a high level of disengagement had a moderate level of exhaustion. The one trainee who had a high level of exhaustion had a moderate level of disengagement. No trainees had both high levels of exhaustion and disengagement.

#### Moodle Engagement:

The Moodle modules are available and details of the numbers completed to date can be found below:

| Module                               | Number completed to date |
|--------------------------------------|--------------------------|
| Introduction                         | 6                        |
| Building A sustainable Healthy Habit | 4                        |
| Moving the Body                      | 3                        |
| Personal Development                 | 2                        |
| Food And Drink                       | 2                        |
| Recharge                             | 2                        |
| Family Friends                       | 2                        |
| Power of the mind                    | 2                        |
| Spirit and Soul                      | 3                        |
| Surroundings                         | 2                        |

Reminders have been sent to the trainees enrolled in the program, prompting them to engage with the online content, and re-complete the Whole Health Assessment at 3-months. These used the same communication channels as outlined above. Moodle login data suggests that engagement by trainees with the online Moodle content has been poor, despite regular reminders being sent to trainees.

#### Budget projections

It is still anticipated that the project will be completed within budget

#### Change to time line affecting evaluations

Due to the later than anticipated start date the Trainees are now (August 2025) being invited to complete the 6-month burnout score. Once this data is available this can be incorporated into the evaluation data.

## Project Abstract 14: 27RCSI

► **Project Title:** EmeraldSIM

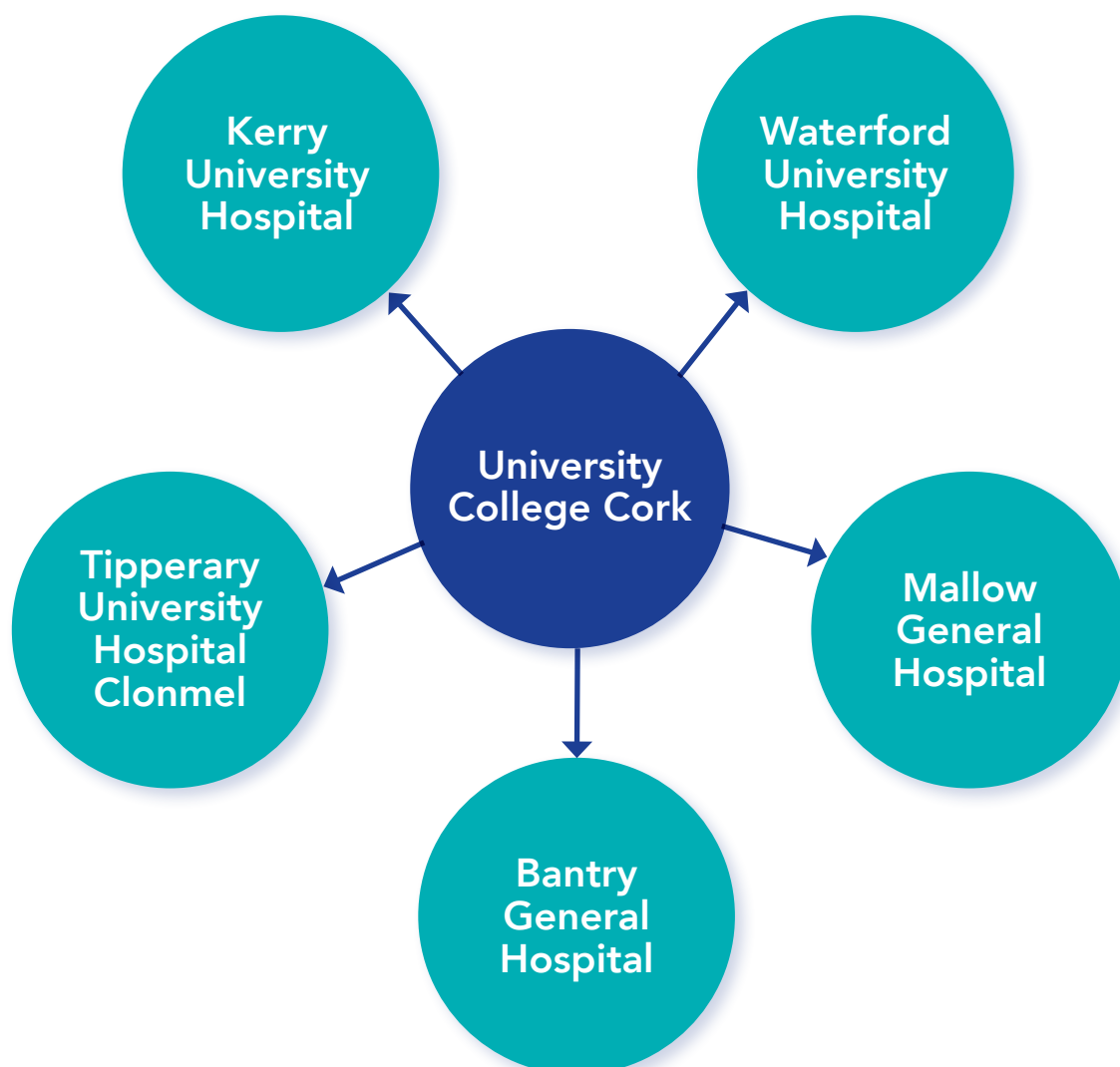
► **Lead Agency:** Royal College of Surgeons in Ireland (RCSI)

### Abstract

Doctors who are new to Ireland and are relocating from a different country face unique challenges. This is particularly true for the estimated 500 International Medical Graduates (IMGs) who begin their practice in Ireland each year. These IMGs face the challenge of adapting to a new healthcare system, where often they do not receive specific induction and support in the Irish Health Service, despite the fact that the practice of medicine is deeply influenced by the social, cultural and organisational context in which it is delivered.

This project consisted of a day long enhanced induction programme, which took place on the 20th July 2024.

There was a hub and spoke approach taken in the delivery of the programme. The course was delivered in person at the hub: Brookfield Health Science Complex, University College Cork and those at the spoke hospitals could join online.



The induction day itself was comprised of a number of didactic sessions in the morning, followed by a break for lunch. The afternoon consisted of a number of EMeraldSIM sessions.

The day was arranged in such a fashion that the morning sessions addressed many of the nontechnical work-related topics that were then later developed in the simulation. Examples of the topics that were discussed in the morning included:

“The System in Which We Work”, “Communication and Professional Matters” and “LGBT Ireland”

The learners were then introduced to the simulation environment and were given a pre-brief on the ethos of sim.

In order to decide on the simulations that would be most impactful a planning process including focus groups was carried out and the result was the following 4 Simulations which were delivered as part of the course:

1. Professional communications
2. Patient autonomy and consent
3. Open disclosure
4. Resuscitation communication

The two-hour afternoon training block was divided between these simulations, each of which was followed by a group debrief and an interactive quiz.

### Evaluation

The evaluation process involved the development of a QR code which was displayed on the theatre screen. Learners were then asked to scan this code in order to fill out a short evaluation form consisting of 11 questions.

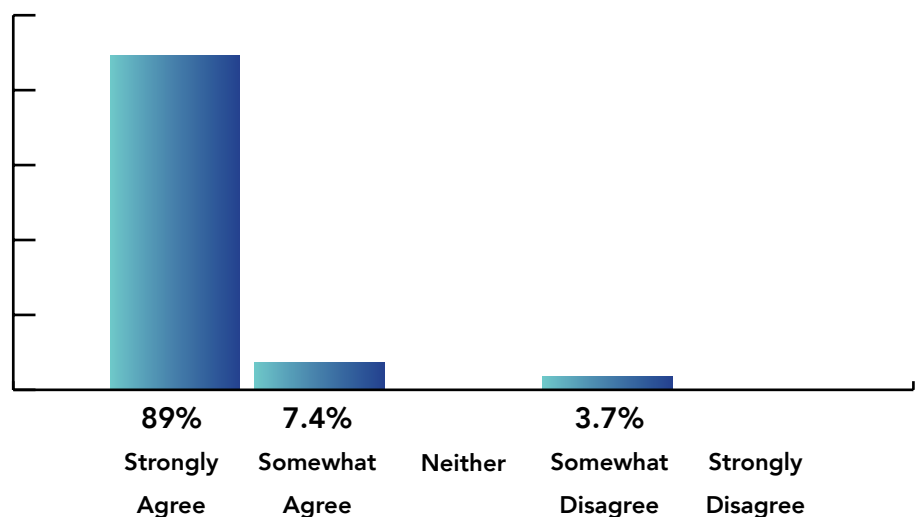
The results of the evaluation can be found below.

### Learnings from the day and future plans

The skills that EMeraldSIM teaches whilst initially designed for medical learners, most certainly has inherent value for many new nursing IMGs that enter the Irish workforce each year. The EMeraldSIM curriculum will be adjusted based on the learner feedback. Whilst strongly positive overall, the feedback did highlight some areas that will benefit from remodelling – mainly to increase the involvement of the peripheral sites into the simulations themselves.

### **Evaluation**

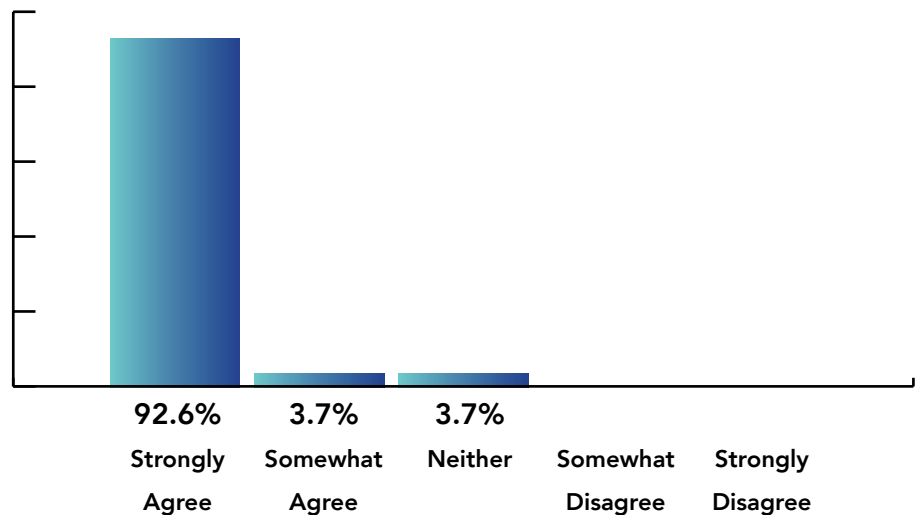
“I feel that my participation in these scenarios will transform or change my approach to patient care”





### Simulation Feedback

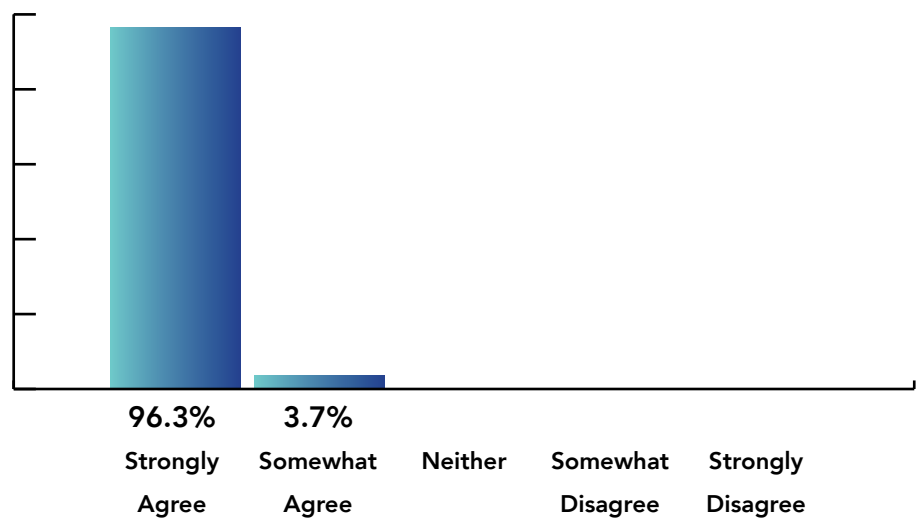
"The simulation scenarios helped me to better understand and manage cultural differences in a medical setting"



### Overall Ratings:

- When asked to rate the overall quality of the EMeraldSIM on a scale of 1-100, the mean response was 98.
- When asked to rate how likely they were to recommend EMeraldSIM to a friend on a scale of 1-100, the mean response was 99.

"The simulation scenarios felt realistic and relevant to real-life scenarios that I might encounter"



### Learnings from the day and future plans

The skills that EMeraldSIM teaches whilst initially designed for medical learners, most certainly has inherent value for many new nursing IMGs that enter the Irish workforce each year. The EMeraldSIM curriculum will be adjusted based on the learner feedback. Whilst strongly positive overall, the feedback did highlight some areas that will benefit from remodelling – mainly to increase the involvement of the peripheral sites into the simulations themselves.

## Project Abstract 15: 28COPi

- ▶ **Project Title: Subspecialty seminars for higher specialist trainees in psychiatry**
- ▶ **Lead Agency: The College of Psychiatrists of Ireland (COPi)**

### Abstract

This project was designed to provide online national seminar/ journal club for specialities where there may be limited opportunity for group teaching at a higher specialist trainee (HST) level, and a need to allow for remote access to a learning peer group.

This allowed for the appropriate level of professional development in the required knowledge and skills for HSTs, as they are often the only HST in the subspecialty at their training site in many instances. Local site-based teaching is more geared towards BSTs and is more generic; this project has filled the gap by allowing for a more in-depth exploration of topics important in preparation for becoming a consultant in a subspecialist area. The topics for the journal club and seminar were based on the curriculum and aligned with the learning outcomes outlined in the training grid. Where possible, the learning outcomes were met by utilising key research papers in the area; however, we identified that in other topics bespoke, specialist teaching was required.

The four path-finder specialities were: Forensic Psychiatry, Consultation-Liaison Psychiatry, Medical Psychotherapy and Psychiatry of Old Age. We had initially designed that these teaching sessions would take the form of national case presentations or journal clubs for the speciality areas, but it became apparent that the trainees' preference was for didactic teaching covering more complex topics in the specialist areas. The sessions were well attended for the small niche areas covered, with 2-12 attendees per session. The trainee feedback was universally positive, with an appetite for further subspecialty teaching. The have been recorded and hosted on the College's moodle site to create a 'library' of online resources.

## Project Abstract 16: 29COPI

- ▶ **Project Title: Development of EPAS across the specialties of Psychiatry**
- ▶ **Lead Agency: The College of Psychiatrists of Ireland (COPI)**

### Abstract

The project was planned to drive the development of a framework of Entrustable professional activities (EPAs) at each stage of training in postgraduate training in psychiatry. A Curriculum revision working group was convened, including representation from all faculties, trainees at each stage of training and a member of REFOCUS patient advocacy group and facilitated by an experienced medical educationalist who has been involved in the development of the EPAs for other postgraduate training bodies (College of Anaesthesiologists of Ireland and Faculty of Radiologists) and for the Irish intern year. Specific focus groups, in the format of full or half day workshops, developed 10 core EPAs for each stage in postgraduate training in psychiatry (foundation year/ completion of BST training and HST/ completion of training at CSCST). Assessment criteria and forms have been developed based on existing material, and entrustment level descriptors agreed and iteratively revised. The development phase, which is ongoing, is an iterative consensus building process. The process of dissemination to the wider educational supervisor group, and building a shared vision for curriculum development, was progressed with a session during the Educational Supervisors conference and to wider stakeholders at a national seminar. It is anticipated that this project would incorporate the running of a pilot or feasibility study, as described in the intern curriculum development project, prior to widespread introduction. The pilot would aim to identify systemic interventions required including trainer development, supportive technology and implementation resources (O'Dowd et al 2020). Consultation with other training bodies has been progressed. IT infrastructure will be required to progress to pilot and implementation phase.









Development Funding 2024-2025 Cycle  
Abstract Booklet