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EVALUATION OF IMPROVEMENT IN PERCEIVED CONFIDENCE AND COMPETENCE IN KEY PALLIATIVE MEDICINE TOPICS FOLLOWING 1 MONTH ELECTIVES FOR INTERNAL MEDICINE RESIDENTS

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Background Postgraduate medical training in Singapore is changing from UK-style to a US-based residency hybrid. Previously trainees joined our hospital palliative medicine rotation for 6 months and had a comprehensive series of tutorials and practice-based learning. Now the challenge is to deliver an appropriate programme to residents who choose a 1 month elective option and are at various stages in junior residency.

We wished to determine whether our learning programme (specific weekly case based tutorials in key areas conducted by a small group of tutors for residents only, supplemented by practice-based learning) was effective. A self-evaluation questionnaire of perceived confidence and competence in 19 symptom control and communication domains, appropriate to

Question	Pre-posting mean	End-posting mean	% improvement
1	2.45	3.36	37
2	2.27	3.64	60
3	1.54	3.27	11
4	1.9	3	58
5	2.27	3.18	40
6	2.45	3	22
7	2.81	3.45	23
8	1.54	3.09	149
9	1.36	3.36	147
10	1.27	3.54	179
11	2.54	3.45	36
12	2.64	3.27	24
13	2.36	2.64	12
14	2.18	3.09	42
15	2.36	3	27
16	2	3.36	68
17	1.91	3.18	66
18	2	3	50
19	1.54	3.09	100

an internal medicine resident was adapted from previous published surveys and linked to the stated learning outcomes for the elective residents. Students were asked to complete a pre-posting and end-posting survey to determine improvement.

Results for the first 10 residents evaluated are presented.

Conclusion This evaluation demonstrated that it is possible to improve resident's perceived confidence in key areas with most improvement in confidence in using parenteral opioids, end of life symptoms and practical procedures.

This exercise helped consultants to know where to focus teaching and practice during the posting and encouraged residents to realise that they had improved.

Further work is planned to link this to their pre- and end-posting MCQ scores to evaluate whether perceived improvement links to improved knowledge scores and the relationship to year of residency.