NETWORK OF ACCREDITED SKILLS CENTRES IN EUROPE

Dear Colleagues and NASCE Enthusiasts,

The 7th Annual NASCE Scientific Meeting took place in Nancy on October 12–13, organized by Professor Nicla Settembre and Professor Marc Braun. The event began with a warm welcome and opening speeches from Prof. Emin Aksoy, Prof. Nicla Settembre, and Prof. Marc Braun.

Over the course of two enriching days, participants enjoyed a series of high-level presentations delivered by leading experts in simulation and medical education. The meeting fostered vibrant discussions and highlighted innovative advancements and research in the field.

Highlights from the First Day of the Scientific Meeting

Opening Presentation
Presenter: Prof. Eva Feigerlova
Topic: *The Multidisciplinary and Interdisciplinary Training Concept*

Prof. Eva Feigerlova delivered an insightful presentation on the integration of multidisciplinary and interdisciplinary approaches in training programs, emphasizing the vital role of simulation-based education within science curricula.

Key Points from the Presentation:

Simulation Training

- Definition: Simulation training uses realistic scenarios to provide hands-on, experiential learning opportunities.
- Benefits:
    - Enables students to apply theoretical knowledge in practical contexts, enhancing engagement and understanding.
    - Fosters critical thinking by requiring real-time decision-making in simulated environments.
    - Offers a safe space for learners to practice, reflect, and improve without the risks associated with real-world settings.

Interdisciplinary Learning

- Definition: Combines knowledge, methods, and perspectives from various disciplines to tackle complex problems and real-life challenges.
- Benefits:
    - Stimulates both critical and creative thinking by integrating diverse viewpoints.
- Challenges:
    - Successful implementation demands thoughtful planning and active collaboration among educators and institutions.

Emotional Intelligence in Simulation:

    - Importance: Bringing the concept of emotional intelligence into simulation training can greatly enhance the learning experience.
    - Incorporation: Including a range of emotions, from passive to active, can improve the realism and engagement of simulations.
    - Balance: While emotions can enhance learning, it is crucial to teach discipline to ensure that emotions do not hinder the learning process.

Prof. Feigerlova emphasized that incorporating simulation training into multidisciplinary and interdisciplinary education can significantly benefit students by providing practical, engaging, and effective learning experiences.

Second Presentation

Presenter: Dr. Dara O'Keeffe
Topic: *Developing Human Factors in Interdisciplinary Training*

Dr. Dara O'Keeffe delivered an engaging talk on the integration of human factors into interdisciplinary training programs, highlighting their essential role in enhancing healthcare delivery and patient safety.

Key Points Discussed:

Human Factors in Healthcare

- Definition: Refers to environmental, organizational, and job-related elements that influence performance in healthcare settings.
- Importance: Incorporates both technical and non-technical skills, which are crucial for reducing errors and improving outcomes.

Expanding the Program and Developing New Competencies

- Program Expansion: Dr. O'Keeffe discussed initiatives to enhance current programs and develop new training competencies.
- Simulated Ward Rounds:

    - Collaboration: Involves interdisciplinary participation, including nursing, pharmacy, and physiotherapy.
    - Realistic Scenarios: Encourages hands-on learning in controlled environments.
    - Goal: To improve teamwork, reduce clinical errors, and enhance patient safety.

Non-Technical Skills in Focus

- Skills such as communication, teamwork, and decision-making were highlighted as foundational to healthcare training.
- Their integration into simulation-based education was shown to contribute significantly to safer, more effective care environments.

Dr. O'Keeffe emphasized that human factors training is indispensable for advancing patient safety and supporting interdisciplinary collaboration in healthcare.

Third Presentation

Presenter: Dr. Cecilia Escher
Topic: *Teamwork and Stress in the OR*

Dr. Cecilia Escher explored the dynamic challenges of teamwork and stress management in the operating room, supporting her points with real-life case studies and data.

Key Points Discussed:

1. Critical Surgery for Trauma

- Case Study: Delays in preoperative processes were shown to negatively affect team efficiency.
- Impact of Training: Post-training analysis revealed marked improvements in workflow and team coordination.

2. Stress and Staff Retention

- Issue: High stress and staff turnover remain pressing challenges in healthcare.
- Solution: Structured training programs have the potential to boost performance by up to 93% and significantly improve retention.

3. Benefits of Team Training

- Engagement: Enhances skill transfer and team commitment.
- Workplace Impact: Reduces stress and improves job satisfaction across multidisciplinary teams.

4. Emphasizing Technical Skills

- Technical competencies within OR teams directly improve outcomes and efficiency.
- Dr. Escher advocated for continued investment in both technical and non-technical skills to elevate team performance and patient care.

Fourth Presentation

Presenter: Dr. Eva Doherty
Topic: *Fail to Prepare, Prepare to Fail: Creating Psychological Safety to Ensure a Successful Simulation Experience*

Dr. Eva Doherty concluded the session with a powerful presentation on psychological safety in simulation-based education.

Key Points Discussed:

Importance of Simulation in Training

- Emotional Realism: Simulations are designed to evoke emotions such as stress and fear, helping participants practice under pressure and prepare for real-world scenarios.

Establishing Psychological Safety

- Safe Learning Environment: Encouraging openness, honesty, and emotional safety is essential.
- Confidentiality: Ensures that participants feel secure to express themselves without fear of judgment.

The Fiction Contract

- Advantages: Enhances immersion, engagement, and learner responsibility.
- Challenges: Must be transparently discussed to manage expectations and acknowledge limitations of simulation.

Purpose and Impact

- While fostering belief in the realism of simulations, the fiction contract primarily aims to create a safe and effective learning space.
- Acknowledging simulation's limitations helps set clear, realistic educational goals while maximizing its value.

Dr. Doherty concluded by stressing that psychological safety is the cornerstone of any successful simulation program and is key to fostering meaningful learning and development.

Fifth Presentation

Presenters: Dr. J. Hubert & Dr. J.P. Henry
Topic: *Team Training in Robotic Surgery*

Dr. Hubert and Dr. Henry delivered a compelling presentation on the evolving role of team dynamics in the context of robotic surgery, an area of increasing technological advancement and clinical significance.

Key Points Discussed:

Rise of Robotic Surgery

- Robotic surgery continues to grow in popularity due to its precision and operational efficiency.
- This advancement necessitates new skill sets across the surgical team, including scrubbed assistants, nurses, and surgeons.

Importance of Teamwork

- Despite the advanced tools, teamwork remains essential and is often underestimated in robotic procedures.
- The successful implementation of robotic techniques hinges on seamless team collaboration.

Mandatory Team Training and Assessment

- The speakers emphasized that training and evaluation should encompass the entire surgical team, not just the surgeon.
- This ensures that everyone is proficient with the technology and aligned with procedural workflows.

Accountability and Collective Efficiency

- Pair-based training was introduced as a strategy to foster accountability and team-wide responsibility.
- Performance is evaluated collectively, reinforcing the notion that every team member's role is crucial.

Four Pillars of Effective Training

- Safe Communication
- Error Violation Management
- External Event Management
- Debriefing and Reflection

Dr. Hubert and Dr. Henry concluded by stating that the success of robotic surgery is directly linked to cohesive, well-trained teams, where shared responsibility and communication are central.

Sixth Presentation

Presenter: Dr. Krystel Nyangoh Timoh
Topic: *Operating Room Nurse Training in Robotic Pelvic Surgery*

Dr. Krystel Nyangoh Timoh addressed the vital role of operating room nurses in the highly specialized field of robotic pelvic surgery.

Key Points Discussed:

Role and Importance of Robotic Nurses

- Robotic-assisted pelvic surgery presents new opportunities and challenges for nurses.
- Precision is paramount, and robotic systems significantly improve accuracy during procedures.

Training Gaps and Team Concerns

- Despite generally positive team dynamics, many nurses feel underprepared.
- Lack of specialized training raises concerns about patient safety and readiness.

Communication and Operational Efficiency

- Effective communication among OR team members enhances procedural flow, reduces surgical time and cost, and improves outcomes.

Call for Specialized Training

- Dr. Nyangoh Timoh highlighted the urgent need for targeted training programs to equip nurses with the technical and procedural competencies required for robotic surgery.

Her message was clear: empowering nurses through training is crucial to the success and safety of robotic surgical procedures.

Seventh Presentation

Presenter: Dr. Manuela Perez
Topic: *Integration of Multidisciplinary Approaches in the Healthcare Curriculum/Medical Education*

Dr. Manuela Perez explored the increasing relevance of multidisciplinary integration and simulation-based learning in modern medical education.

Key Points Discussed:

Value of Multidisciplinary Approaches

- These approaches are instrumental in enhancing minimally invasive and robotic surgical techniques.
- Including diverse disciplines in the curriculum leads to better educational and clinical outcomes.

Evolution of Simulation in Surgical Education

- Initially underutilized, simulation now plays a central role in surgical training.
- It allows repeated practice in risk-free environments, boosting competence and confidence.

Benefits of Simulation

- Reduces complication rates and sharpens skills in evasive procedures.
- Enhances learning without compromising patient safety or equipment.

Simplification Through Technology

- Recent technological advancements have made simulation training simpler, more accessible, and more effective than traditional methods.

Three Phases of Simulation Training:

- Cognitive Phase: Theoretical knowledge acquisition
- Integration Phase: Blending theory with practical simulations
- Automatization Phase: Developing instinctive, real-time application of skills

Dr. Perez emphasized that the combination of multidisciplinary education and structured simulation is key to preparing healthcare professionals for the demands of modern surgical practice.

Eighth Presentation

Presenter: Dr. Jean Paul Fournier
Topic: *Training for Clinical Reasoning in Immersive Simulation with Peer Students*

Dr. Fournier emphasized the development of clinical reasoning as a cornerstone of effective patient care. His session focused on integrating simulation and peer-based learning to enhance diagnostic accuracy and decision-making.

Key Points Discussed:

Significance of Clinical Reasoning

- Involves systematic information gathering, analysis, and decision-making.
- Accurate clinical reasoning leads to better diagnoses and improved patient outcomes.

Patient-Centered Approach

- Begins with understanding the patient's primary concerns, which guides the entire diagnostic process.

Planned Systematic Review

- A review of interventions aimed at improving diagnostic decision-making will be conducted to inform future training strategies.

Simulation-Based Exercise

- Peer students participate in a 15-minute simulation exercise to apply clinical reasoning in realistic scenarios.
- Students prepare scripts in advance to enhance preparedness and engagement.

Debriefing Component

- A structured 15-minute debrief allows participants to reflect, discuss challenges, and receive feedback.

Conclusion: Dr. Fournier highlighted the importance of immersion, reflection, and peer collaboration in clinical reasoning training, advocating for a systematic approach to ensure effective diagnostic practices

Ninth Presentation

Presenter: Prof. Marco Ticonosco
Topic: *Psychometric Assessment of Intraoperative Performance in Robot-Assisted Partial Nephrectomy*

Prof. Ticonosco presented a study evaluating the reliability of performance assessments in robotic surgery using GEARS and binary metrics, comparing novice and experienced surgeons.

Key Points Discussed:

Study Objective

- To compare intraoperative skill levels between novices and experienced surgeons during robotic partial nephrectomy.

Assessment Tools

- GEARS Scale: Assesses depth perception, dexterity, efficiency, force sensitivity, and control.
- Binary Metrics: Provide pass/fail criteria for specific tasks, ensuring objective assessment.

Biometric Translation Benchmark

- A defined threshold determines whether a surgeon is qualified to operate independently.
- Below-benchmark performance precludes independent operation, ensuring patient safety.

Conclusion: Prof. Ticonosco reinforced the importance of psychometrically robust assessment tools for standardizing surgeon evaluation and maintaining high safety standards in robotic surgery.

Tenth Presentation

Presenter: Prof. Nicola Frego
Topic: *Proficiency-Based Progression Training for Robotic Emergency Undocking*

Prof. Frego introduced the Proficiency-Based Progression (PBP) training model, specifically tailored to the critical procedure of emergency undocking during robotic surgery.

Key Points Discussed:

PBP Methodology

- Focuses on mastery of specific competencies before trainees can progress, rather than time-based advancement.

Demonstrated Effectiveness

- First-year trainees showed marked improvement in performance and skill retention.

Skill-Building Focus

- Emphasizes incremental learning and real-world application to build core proficiencies.

Integration of New Techniques

- The program is updated regularly to include emerging robotic procedures and techniques.

Emergency Undocking Preparedness

- Ensures trainees are fully competent in safely disengaging robotic systems during emergencies, a critical safety protocol.

Conclusion: Prof. Frego underscored the success of PBP training in robotic surgery, particularly in preparing teams to handle high-stakes emergency scenarios with confidence and precision.

Eleventh Presentation

Presenter: Dr. Thomas Klein
Topic: *Reduced Anxiety Among Caregivers Facing Cardiac Arrest After Simulation-Based Training*

Dr. Klein presented research on the psychological and performance benefits of simulation-based training for caregivers in In-Hospital Cardiac Arrest (IHCA) scenarios.

Key Points Discussed:

Cardiac Arrest Incidence

- Hospital cardiac arrests occur with increasing frequency, underscoring the need for preparedness.

Training Objective

- To track long-term reductions in anxiety among caregivers after IHCA simulations.

Simulation and Debriefing

- Realistic simulations followed by structured debriefings provide practical experience and emotional processing.

Reduced Anxiety Levels

- Early data indicates that simulation significantly reduces caregiver anxiety, leading to more effective response during real events.

Improved Mental Well-Being and Team Performance

- Lower stress levels correlate with better teamwork, communication, and decision-making during emergencies.

Conclusion: Dr. Klein emphasized simulation's role in enhancing caregiver readiness, mental resilience, and patient care quality during cardiac emergencies.

Twelfth Presentation

Presenter: Dr. Leander De Mol
Topic: *Measuring Residents' Competences in Chest Tube Insertion*

Dr. De Mol presented findings on the evaluation and enhancement of resident competence in chest tube insertion, a critical and high-risk procedure.

Key Points Discussed:

1. Chest Tube Insertion as a Critical Skill
   - A lifesaving yet invasive procedure requiring high precision and confidence.
2. Need for Competence Measurement
   - Systematic assessment of resident skills is essential to ensure patient safety and effective care.
3. Simulation-Based Study Design
   - Residents were assessed using simulation models with structured evaluation tools to measure procedural proficiency.
4. Effectiveness of Simulation Training
   - Participants who received simulation training showed significantly improved technical skills and confidence compared to those without.
5. Hands-On Practice Benefits
   - Simulation allowed risk-free practice, helping residents gain experience in a safe environment.
6. Educational Implications
   - Dr. De Mol advocated for integration of simulation training into core curricula to better prepare residents for real-world clinical scenarios.

Conclusion: Simulation-based training in chest tube insertion enhances both competence and confidence, underscoring the need for structured performance assessment in medical education.

Thirteenth Presentation

Presenter: Prof. Eva Feigerlova
Topic: *Team-Based Learning (TBL) Combined with Video Vignettes Improves Clinical Reasoning and OSCE Scores*

Prof. Feigerlova introduced an educational innovation that combines Team-Based Learning (TBL) with video vignettes to strengthen clinical reasoning and OSCE performance.

Key Points Discussed:

1. TBL Foundations
    - TBL fosters active learning and teamwork and is widely used in medical education to enhance clinical problem-solving.
2. Study Design
    - Two student groups were compared: one using TBL alone, the other using TBL + video vignettes, to assess impact on clinical reasoning and OSCE scores.
3. Enhanced Clinical Reasoning
    - The video-enhanced group demonstrated superior ability in analysing and interpreting clinical scenarios.
4. Improved OSCE Outcomes
    - Students using video vignettes performed significantly better on Objective Structured Clinical Examinations, especially in applied knowledge stations.
5. Increased Engagement and Retention
    - Multimedia elements increased motivation, attention retention, and practical application of theoretical knowledge.
6. Broader Implications for Medical Education
    - The study supports blended learning models combining traditional methods with multimedia for improved academic and clinical outcomes.

Conclusion: Prof. Feigerlova highlighted the added value of integrating video content into team-based strategies, showing measurable gains in clinical performance and student engagement.

Fourteenth Presentation

Presenter: Prof. Dieter VYT
Topic: *Immersive VR Simulation to Facilitate Team Training*

Prof. VYT explored the use of immersive Virtual Reality (VR) for team training in healthcare, focusing on human factors and interdisciplinary collaboration.

Key Points Discussed:

1. Human Factors & Collaboration
    - Successful healthcare delivery relies on teamwork, communication, and role clarity, especially in high-pressure environments.
2. Key VR Simulation Components

    - Briefing (goal setting), Scenario Planning (realism), and Debriefing (reflection) were central elements.
3. Debriefing as a Learning Engine
    - Emphasis on "double-loop learning"—encouraging participants to reflect not just on actions, but also the underlying assumptions behind them.
4. Exposure vs. Learning
    - Prof. VYT stressed that exposure alone is insufficient; learning must be intentional, with opportunities for feedback and reflective practice.
5. Role of Interdisciplinary Teams
    - VR simulations benefit from input across healthcare disciplines (medicine, nursing, pharmacy, emergency response), mirroring real-world complexity.
6. Advantages of VR in Education
    - Offers engaging, repeatable, and realistic experiences, enabling safe practice of rare or complex situations.

Conclusion: Prof. VYT concluded that immersive VR, when paired with thoughtful debriefing and interdisciplinary involvement, can significantly enhance team dynamics, clinical effectiveness, and patient safety.

Fifteenth Presentation

Presenter: Prof. Dilek Kitapcioglu
Topic: *Debriefing in Multidisciplinary and Interdisciplinary Training*

Prof. Kitapcioglu highlighted the essential role of debriefing in simulation-based education, especially within multidisciplinary and interdisciplinary team training.

Key Points Discussed:

Role of Debriefing

- Defined as a deliberate learning conversation that encourages reflection and analysis after an experience.

Types of Debriefing

- Clinical Debriefing: Reflecting on real-life encounters.
- Simulation Debriefing: Focused on simulated scenarios.

Stages of Debriefing and Moral Development

- Four cognitive development stages: Dualism, Multiplicity, Relativism, and Commitment.

Psychological Safety

- Creating a safe environment where learners can speak openly without fear is essential for effective debriefing.

Active Learner Participation

- Learners must actively engage by analyzing and integrating learning experiences.

Common Mental Model

- A shared understanding among participants enhances team communication and coherence.

Overall Benefits

- Effective debriefing improves individual performance, strengthens team dynamics, and promotes collaborative learning.

Conclusion: Prof. Kitapcioglu stressed that structured debriefing is foundational to effective simulation training, supporting reflection, learning integration, and team collaboration.

Sixteenth Presentation

Presenter: Prof. David Gachoud
Topic: *Using an OSCE to Assess the Collaborative Competences of Medical Students*

Prof. Gachoud discussed the application of the Objective Structured Clinical Examination (OSCE) in evaluating the collaborative competencies of medical students.

Key Points Discussed:

Purpose of OSCE

- Designed to assess both clinical and teamwork skills, preparing students for collaborative practice during residency.

Assessment Approach

- Combines simulation-based assessment (focused on individual performance) with traditional OSCEs (emphasizing collaborative care).

Structure of OSCE

- Part One: Assesses core clinical competencies.
- Part Two: Conducted with expert oversight, involving case consultation and explanation.

Focus Areas

- Evaluates patient care abilities, communication, and team interaction in clinical settings.

Benefits

- Creates a safe yet realistic testing environment and offers a comprehensive view of both individual and collaborative performance.

Conclusion: Integrating OSCEs with simulation effectively prepares students for real-world practice by evaluating both technical and collaborative competencies essential for safe and effective healthcare.

Seventeenth Presentation

Presenter: Prof. Stéphane Zuilu
Topic: *Multidisciplinary Teaching for Non-Technical Skills Training in Medical Education*

Prof. Zuilu emphasized the importance of non-technical skills, particularly communication, in medical education and patient safety.

Key Points Discussed:

Emphasis on Communication

- Non-technical skills such as clear communication and empathy are critical for clinical success and team dynamics.

Simulation-Based Education

- A structured training program with six simulation scenarios targeted at 5th-year students, addressing a variety of interpersonal challenges.

Handling Difficult Conversations

- Specialized training for 6th-year students focused on delivering bad news and navigating emotionally sensitive discussions.

Integration of E-Learning

- E-learning modules complement simulation to allow self-paced reinforcement of theoretical concepts.

Educational Goal

- To create well-rounded medical professionals capable of managing the emotional, interpersonal, and ethical complexities of medical practice.

Conclusion: Prof. Zuilu's multidisciplinary approach, blending simulations and e-learning, effectively prepares students for the human aspects of medicine, enhancing empathy and communication competence.

Eighteenth Presentation

Presenter: Prof. Dan Benhamou
Topic: *Strengths and Weaknesses of Simulation for Healthcare Professions*

Prof. Benhamou offered a critical appraisal of simulation in healthcare education, discussing both its advantages and limitations.

Key Points Discussed:

Effectiveness of Simulation

- Generally effective in enhancing knowledge retention and skills, especially for hands-on procedures.

Mixed Learning Outcomes

- While many studies show positive results, some show no significant difference compared to traditional teaching.

Cost and Accessibility

- Full-scale simulations are expensive and resource-intensive.
- Task trainers offer a cost-effective alternative focused on specific procedures.

Strengths

- Provides risk-free practice, immediate feedback, repetition, and supports development of critical thinking and teamwork.

Limitations

- May not fully replicate the complexity and unpredictability of real clinical environments.

Conclusion: Prof. Benhamou advocated for a balanced approach, combining simulation and traditional methods to deliver a more well-rounded and effective medical education.

Session 5: Second Day of NASCE Scientific Meeting

Prof. Dieter VYT – ViCosim: A Virtual Communication Simulation for Medical Students

- Introduction: ViCosim is a virtual communication simulation tool embedded in the medical curriculum to help students practice real-life interaction scenarios.
- Learning Approach: Role-playing fosters experiential learning, self-reflection, and peer observation, essential for effective medical communication.
- Curriculum Fit: Carefully aligned with educational goals to enhance relevance.
- Objectives & Benefits:
    - Develops communication and teamwork skills.
    - Builds confidence through safe, repeated practice.
    - Bridges the gap between theoretical learning and real-world application.

Prof. Isabelle Dehaene & Prof. Allison Demesteer – Multidisciplinary Training in the Delivery Room and Perinatal Unit

- Program Overview: On-site, multidisciplinary training involving midwives, ObGYNs, anaesthesiologists, and neonatal teams with real patients, focusing on realism and confidentiality.
- Key Skills Developed:
    - Technical & Non-Technical: Strong emphasis on communication under pressure.
    - Leadership & Teamwork: Clear expectations, feedback culture, and collaboration.
- Generational Challenges: Tailored support for anxious new learners using real environments and video-based learning.
- Outcomes:
    - Improved communication and cooperation.
    - Practical tools like protocol revisions and memo cards for decision-making.

Prof. Cedric Dumas – Procedural Simulation & Collaboration with Medical Engineers

- Program Overview: Realistic simulation training with mannequins and actors to hone procedural skills.
- Innovative Methods:
    - Self-confrontation interviews: Video-based reflection to enhance learning.
    - Posture tracking: Analyzes physical movement for procedural accuracy.
- Interdisciplinary Collaboration:
    - Partnership with medical engineers and paramedical researchers to enhance simulation realism and research validation.
- Technology & VR:
    - Cautious endorsement of VR: useful in complex or inaccessible scenarios but not a substitute for tactile realism.
- Balanced Training Philosophy: Emphasizes integrating new tech without abandoning effective hands-on methods.

Prof. Deborah Jaeger: Leadership and Interprofessional Simulation in Emergency Situations

Simulation as a Training Tool

- Simulations use mannequins, actors, and AI to replicate emergency scenarios.
- Purpose: Provide a safe space for errors to enhance real-world performance.
- Goal: Improve preparedness and reduce clinical mistakes in emergencies.

Leadership and Teamwork

- Effective leadership boosts survival rates during emergencies.
- Clear communication is critical—more vital than technical skills in crisis situations.
- Good leaders manage roles, stress, and debriefs while maintaining the "big picture."
- Leadership quality directly impacts CPR effectiveness.

Non-Technical Skills Emphasis

- Training focuses not just on procedures, but also:
  - Leadership
  - Team cooperation
  - Resource and stress management

Prof. Daniel Aiham Ghazali: Interprofessional Education (IPE) – "Yes, but …?!"

Understanding IPE

- IPE involves learning *with*, *from*, and *about* each other across healthcare disciplines.
- Enhances rather than replaces traditional education.
- Aims to bridge academic theory and real-world clinical collaboration.

5W and H Framework in IPE

- Who: Identifies each profession's role.
- What: Clarifies each team member's contribution.
- Where: Location of collaboration (e.g., hospitals, clinics).
- When: Timing of interventions.
- Why: Justification behind each professional's actions.
- How: Coordination strategies for teamwork.

Challenges in Implementation

- Curriculum alignment and scheduling across professions.
- Maintaining student engagement in collaborative learning environments.

Abstract Session Summary – Session 6

Prof. Come Slosse – *Transdisciplinary in Obstetrics: New Simulation Training Program to Optimize Collaborative Care*

Prof. Slosse introduced a transdisciplinary simulation training program in obstetrics, emphasizing content curation as a strategy to enrich hybrid learning. By incorporating diverse topics such as Alzheimer's, cancer, organ grafts, and HIV, the program aimed to enhance collaborative care. Post-training evaluations showed improved topic diversity and increased participant knowledge, confirming the effectiveness of the curated, simulation-based approach.

Prof. Nicola Frego – *Train the Trainers: Proficiency-Based Progression Training*

Addressing the shortcomings in traditional surgical training, Prof. Frego presented a proficiency-based progression (PBP) model. Over 30 surgeons had previously failed to meet training standards, prompting a shift toward this structured, outcome-focused methodology. The European Robotics Surgical Section now emphasizes training the trainers to implement PBP effectively, aiming to ensure surgical competence and improve patient outcomes.

Prof. Laure Joly – *Training of Trainers: A Toolbox for Resident Supervisors*

Prof. Joly unveiled a training toolbox tailored for resident supervisors. Developed with university collaboration, it supports a wide range of medical specialties and includes guidance on regulatory frameworks for extra-hospital internships. The training also incorporates simulation to boost motivation and authenticity, thereby enhancing the supervisory experience and educational quality.

Dr. Gerard Audibert – *Cognitive Aids and Critical Events: A Way to Save Lives*

Dr. Audibert emphasized the life-saving potential of cognitive aids—such as checklists and algorithms—in managing critical events. Despite their value, inconsistent adherence to these tools remains a concern. Simulation-based testing has proven essential for validating their effectiveness, showing improvements in error reduction, intervention timing, and clinical performance.

Prof. Nguyen Tran – *Interdisciplinary Surgical Training Centre: How to Build It?*

Prof. Tran discussed the development of an interdisciplinary surgical training centre, highlighting the cost-efficiency and error-reduction benefits of simulation. Continuous innovation in pedagogy and surgical techniques was underscored as a key driver for training excellence and improved patient care.

Closing Remarks and Achievements

The session concluded with the recognition of three outstanding abstract presentations, which received awards for their contributions to medical education. Several NASCE centres were also re-accredited for four years, underscoring their ongoing commitment to excellence.
Dr. Van Herself urged timely application submissions for UEMS accreditation, and Dr. Aksoy invited all accredited centres to participate in the next business meeting—an opportunity for collaboration, networking, and strategic exchange across Europe's leading training centres.