

881 Delivering Consultant-Led Teaching During A Global Pandemic

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Aim: Providing high quality teaching has become increasingly difficult as social distancing and disrupted schedules caused by the COVID-19 pandemic make large in-person gatherings impractical. Yet the need and demand for this has only increased. We sought to use an innovative virtual + in-person format to facilitate delivery.

Method: We designed a 6-session ENT teaching programme for GP trainees over 3 evenings. Each session was consultant-led, delivered in-person in a large lecture theatre, and simultaneously broadcast on Microsoft Teams. The in-person element was intended to permit practical demonstrations, e.g., of the Dix-Hallpike test, to supplement presenter's videos. Attendees could attend in-person or virtually. Sessions were timed to allow staff from the nearby hospital to join immediately after work.

Results: All attendees attended virtually. And all felt that the video demonstrations were sufficient, and that in-person replication was unnecessary. Course delivery was rated 'very good' or 'excellent' by 88% (n = 17), and the course overall was rated similarly by 94%. Several comments suggested that in future we focus on virtual delivery by shifting the starting time later to "allow a natural break after work".

Conclusions: The COVID-19 pandemic has altered many aspects of our lives, and teaching delivery is not immune to this. The overwhelming preference for virtual attendance amongst our cohort suggests that many doctors are comfortable with, and even enthusiastic for, this change, and that teaching can still be effective. Future iterations of this course will likely emphasise the virtual element and record the sessions to allow for time-shifted viewing.