

teamworking (4(3.25-4.75) vs. 5(5-5.75); $p=0.01$), and paperwork (2(2-3.75) vs. 5(5-5); $p=0.01$). The FiY1 programme improved integration within teams and facilitated training whilst medical school placements left participants feeling apprehensive and unprepared to practice.

Conclusions: This session provided an engaging method of increasing preparedness towards common challenges new physicians face. This study suggests future senior medical student apprenticeships should give the same investment, opportunities, and responsibilities as that of the FiY1 programme.

Education and Training Prize

11 A Sequential Simulation Experience for Interim Foundation Doctors and Analysis of Preparedness to Practice Early

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Introduction: Covid-19 necessitated the early graduation of medical students to join the healthcare workforce as Foundation Interim Year 1 (FiY1) doctors. A sequential simulation session was implemented to improve and assess FiY1 preparedness towards approaching deteriorating patients.

Method: 12 FiY1 doctors participated in the session containing three sequential major stations: complex new admission, ward-based management, and acute deterioration. Participants interpreted investigations, performed examinations, created management plans, and escalated using a pager.

Results: There was a significant improvement in preparedness for giving treatment (median(IQR): pre-simulation 3(3-4) vs. post-simulation 4(4-4.75); $p=0.04$) and paperwork (2(2-3.75) vs. 4(3.25-4.75); $p=0.03$). Following four weeks of FiY1 participants demonstrated significant improvement in preparedness for giving treatment (median(IQR): pre-simulation 3(3-4) vs. post-FiY1 4.5(4-5); $p=0.01$), communication and