and many projects to study and disseminate for the final year students.

**Methods**
The final year students are invited to join any available sessions and provide experiential learning on how to teach skills, assess the skills, deliver presentations and teach simulation sessions both low fidelity simulation and simulated patients under supervision. They were subsequently given constructive feedback on their sessions and given further opportunities to demonstrate learning from these points in different areas:

A. Design and planning of learning activities
B. Teaching and supporting learners (observation/involvement)
C. Assessment and feedback to learners (observation/involvement)
D. Educational research and evidence-based practice

Following this cycle students were required to fill in a feedback form regarding how they subjectively felt they had improved throughout the course. These data were then compared and contrasted.

**Summary of results**
The course is still running up to the end of June and findings from these questionnaires could be presented in the poster with discussion, conclusions and recommendations:

**REFERENCES**


**P85**

**DO GENDER-BASED DISPARITIES IN AUTHORSHIP AND EDITORIALSHIP EXIST IN HEALTHCARE SIMULATION JOURNALS? A BIBLIOMETRIC REVIEW OF THE RESEARCH**

Sinéad Lydon, 1,2 Áine De Bhulbh, 1,2,3 Senan Maher, 1,2,3 Caoimhe Madden, 1,2 Dara Byrne, 1,2 Paul O’Connor*, 1 School of Medicine, National University of Ireland, Galway; 2 Irish Centre for Applied Patient Safety and Simulation, National University of Ireland, Galway; 3 Department of General Practice, School of Medicine

10.1136/bmjstel-2019-aspihconf.182

**Background**
Although academic publishing is intended to be objective, and thus should be gender neutral, a gender bias in the authorship of papers has been observed across varied medical specialties. Similarly, research suggests that women are underrepresented on editorial boards of influential medical journals. The purpose of this study was to carry out a retrospective bibliometric review to assess whether gender-based disparities in authorship and editorialship exists across three healthcare simulation journals.

**Summary of work**
All articles published in the three existing healthcare simulation-specific journals (i.e., Simulation in...
Abstract P85 Table 1 Gender comparisons of authorship and editorialship across three simulation journals

<table>
<thead>
<tr>
<th>Journal</th>
<th>Simulation in Healthcare</th>
<th>BMJ STEL</th>
<th>Advances in Simulation</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Authorship</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>First author</td>
<td>Male 60.1% Female 39.9%</td>
<td>Male 57.6% Female 42.4%</td>
<td>Male 58.5% Female 41.5%</td>
<td>Male 59.6% Female 40.4%</td>
</tr>
<tr>
<td>Last author</td>
<td>Male 66.4% Female 33.6%</td>
<td>Male 61.7% Female 38.3%</td>
<td>Male 66.7% Female 33.3%</td>
<td>Male 65.6% Female 34.4%</td>
</tr>
<tr>
<td>Editorialship</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Editor-in-Chief</td>
<td>Male 63.6% Female 36.4%</td>
<td>Male 40% Female 60%</td>
<td>Male 60% Female 40%</td>
<td>Male 57.7% Female 42.3%</td>
</tr>
<tr>
<td>Associate Editors</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Senior Editors</td>
<td>71.8% Female 28.2%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Editorial Board</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Healthcare, BMJ Simulation and Technology Enhanced Learning, and BMC Advances in Simulation) were examined from the first published issue of each journal until the final issue of 2018. Data extracted related to authorship of papers published in each of the three journals (i.e., type of article; gender of first and last authors; country and affiliation of first and last authors) and editorialship at each journal (i.e., the gender of each member of the journal’s editorial board).

Summary of results A total of 873 studies (49.5% original research, 50.5% non-research) met the inclusion criteria. Table 1 presents the gender comparison of first and last authors, and editorial board members for each journal. First and last authors were predominantly male across all journals. Further, with the exception of a female Editor-in-Chief of one journal, and a greater proportion of female than male associate editors in another, gender disparities across the remaining categories of editorial boards existed.

Discussion and conclusions Male overrepresentation in authorship and editorialship was evident across the included journals, with female representation rates similar to those of previously conducted studies across a range of medical fields such as psychiatry, surgery and paediatrics.

Recommendations Considering publication in peer-reviewed journals, and serving on editorial boards, is considered an important indicator of academic productivity and success, and serves as a means of influencing discourse and practice in a field, future efforts should focus on actionable strategies to improve rates of female authorship and editorialship.

REFERENCES

DEVELOPING A NEAR-PEER SIMULATION FACULTY: OUR EXPERIENCES
Matthew Aldridge*, Edward Miles, Thomas Cairns, Oliver Owen. North Bristol Nhs Trust, Bristol, UK

Background Near-peer learning has been shown to be beneficial to both learners and near-peer tutors (NPTs).¹ NPT led sessions benefit from rapid rapport building with learners due to the relatability of tutors and their ‘informed insight’². Simulation training in particular relies on good rapport with learners to create psychological safety³, and is therefore well suited to the NPT approach. This approach also helps to engage developing educators in simulation-based education (SBE) at an early stage in their careers.

Summary of work At North Bristol NHS Trust we have developed a train-the-trainer course to empower postgraduate year 1–2 (PGY1-2) doctors. Following this course participants are invited to attend a subsequent ‘live’ simulation for other PGY1-2 doctors as NPTs, where they receive close support from more experienced simulation faculty.

Summary of results In the last 12 months we have trained 27 individuals to deliver their own simulation training, and subsequent supervised ‘live’ simulation sessions have been particularly well received. Furthermore, feedback from PGY1-2 participants in these NPT-led simulation sessions remains equivalent to sessions delivered by senior faculty.

Discussion and conclusions We are very encouraged by the feedback received by our NPT faculty during courses for fellow PGY1-2 doctors, and suggest this reflects the benefits of NPT ‘informed insight’ allowing quick rapport building to create a psychologically safe environment. Furthermore this approach has significantly bolstered our available simulation education faculty, allowing increased delivery of simulation education across our institution.

Recommendations Developing educators acting in an NPT role can be a valuable asset to any institution using SBE. A targeted train-the-trainer course with specific post-course supervised practice is an effective method of supporting NPTs, and could easily be adopted in other institutions.

REFERENCES
1. Rashid MS, Sobowale O, Gore D. A near-peer teaching program designed, developed and delivered exclusively by recent medical graduates for final year medical students sitting the final OSCE. BMC medical education. 2011 December;1(1):11.

AN EXPLORATION OF SELF-CARE IN DEBRIEFING AND FUTURE RECOMMENDATIONS
¹Marcela Schilderman*, ²Hannah Ianreli², ³Camilla Tookey, ⁴Chris Attoe. ¹South London and Maudsley Hospital, London, UK; ²Maudsley Simulation, London, UK

P87