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>Male: N/A Female: N/A</td>
<td>Male: 40% Female: 60%</td>
<td>Male: 66.7% Female: 33.3%</td>
<td>Male: 55.7% Female: 33.3%</td>
</tr>
<tr>
<td>Senior Editors</td>
<td>Male: 71.8% Female: 28.2%</td>
<td>Male: 53.8% Female: 46.2%</td>
<td>Male: 57.1% Female: 42.9%</td>
<td>Male: 62.8% Female: 37.2%</td>
</tr>
</tbody>
</table>

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). NPT led sessions benefit from rapid rapport building with learners due to the relatability of tutors and their ‘informed insight’. Simulation training in particular relies on good rapport with learners to create psychological safety, 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.

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. 2017;11(1):11.

AN EXPLORATION OF SELF-CARE IN DEBRIEFING AND FUTURE RECOMMENDATIONS

Matthew Aldridge*, Hannah Iannelli*, Marcela Schilderman*, Camilla Tooley, Chris Attoe. South London and Maudsley Hospital, London, UK; Maudsley Simulation, London, UK

Background Prior research has suggested debriefing is a significant experience for learners, and debriefing sessions can be emotionally challenging for facilitators, however, the literature is sparse in regards to near-peer debriefing. This study conducted a qualitative study to explore how near-peer debriefing influences self-care for educators.

Methodology This qualitative study used focus group methodology to collect data from experienced near-peer debriefers.

Summary of results A total of 10 participants were recruited, predominantly female, with an average of 5 years’ experience. Frequent themes included personal growth, the psychological safety debriefing can provide, and the importance of debriefing training and support. Future work suggests the need for support strategies for near-peer educators.

Discussion and conclusions The study has demonstrated the importance of support for near-peer educators, and highlights the need for continued education and training in debriefing techniques.

Recommendations Future work should focus on providing support strategies for near-peer educators, potentially in the form of debriefing training and mentorship.