such dusts, chemicals or proteins. The International Labour Organisation estimates that 700.000 people in the world die yearly from occupational lung diseases. Teaching the subject at the undergraduate levels in medical schools is important, so that the students consider these diagnoses later on in their careers. However, earlier surveys have shown that the interest in occupational medicine is low in medical students. Teaching occupational lung diseases can be especially challenging since the terminology is confusing.

Methods In order to improve students' learning, a puzzle game on occupational lung diseases was developed. On a game-board, five columns and ten rows made a grid of fifty squares. The headings of the five columns were different disease groups: Pneumoconiosis, Inhalation Fevers, Allergic Alveolitis, Occupational Asthma, and Toxic Pneumonitis. The rows headings were: Subtypes, Prevalence, Exposure, Symptoms, Clinical Findings, Lab Tests, Chest X-ray, Pulmonary Function Tests, Prognosis, and Treatment. Fifty cards with text descriptions should be placed on the correct square on the board. For example, one card described that more than 350 substances (Exposure) have been associated with occupational asthma. After finding the correct place for all the cards, they are turned upside down showing a poster from a movie related to occupational medicine for example Norma Ray. The students are asked to describe that relation.

Results The game has been tested by 160 medical students who were very interested and worked intensely. The students gave high ratings in the course evaluation and enjoyed the puzzle.

Conclusion This educational game on occupational lung disease probably improved medical students' learning outcomes compared to passively listening to lectures. The game is also suitable for other groups such as physicians and staff in Occupational Health Services.

## 1721f

## STRONGER TOGETHER - WORKING TOGETHER TO TACKLE THE OCCUPATIONAL HYGIENE VOID

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Introduction The Occupational Hygiene Training Association (OHTA) is a non-profit voluntary organisation, aiming to mind the gap of capacity of occupational hygiene competencies by providing a global training and qualifications scheme in occupational hygiene ranging from a foundation level to specialised courses at master level.

Methods The OHTA modular scheme provides a platform to build occupational hygiene capabilities at both national and company level. Courses can be taken in isolation and there are no prior learning requirements. Students can start with a foundation level course and progress to courses at two other levels building up progressively higher levels of practice, including academic study to master level and eligibility for professional qualification.

Results Through our training system and qualifications, we provide a means of developing practical skills to recognise and manage exposures to health and safety risks caused by exposure to hazards such as chemicals, dusts, fumes, noise, ergonomics, and heat and cold. Our courses and qualifications

have been developed with the support of the International Occupational Hygiene Association (IOHA) and its 34 member organisations.

More than 100 000 have used our material, 780 courses have been delivered and more than 6500 candidates have taken exam. Our course materials are being downloaded more than currently undergoing translation into a variety of languages.

Discussion Partnerships with key stakeholders are important to further growth the training scheme. Our website, www. OHLearning.com provides free access to information on all our training materials and qualifications, which can be accessed and downloaded free of charge. Our qualifications and awards are overseen by a Qualifications Group that includes representatives of the major occupational hygiene examining boards across the world. Individuals successfully completing defined courses of study and practice can apply for recognition and membership of these and other national associations.

1680 TRENDS IN MEDICAL EDUCATION – QUALITY IMPROVEMENT, SIMULATION AND OUTCOME BASED EDUCATION – RESEARCH & ASSESSING TRAINING AND COMPETENCE

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Aim of special session Bringing together simulation, outcomebased education and quality improvement to highlight the future direction of medical education and allow participants to consider these aspects when designing training and educational interventions for Occupation Medicine learners and trainees.

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1680a TRAINING DOCTORS FOR THE FUTURE

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Although significant advances have occurred in medical and related sciences, the quality improvement and patient safety movements have been slow to gain traction. There are many 'pockets' accessed and downloaded free of charge. Our qualifications and awards are overseen by a Qualifications Group that

related sciences, the quality improvement and patient safety movements have been slow to gain traction. There are many 'pockets' of progress around the globe; however, the scale and spread has been slow. Stimulating culture and system change in healthcare requires a definitive change in leadership style and approach. Health leaders of today must commit to the critical success factors and demonstrate the attributes necessary to create change and raise the bar for quality improvement and safety. We discuss here, key competencies required for the development of future leaders in quality improvement and how to those competencies can be achieved within a cultural context.