Discussion  Training in the communication skill of breaking bad news is useful and interesting to medical students. Identifying key strategies to employ whilst breaking bad news, and engaging in role play, improves confidence.

Results  Data were analyzed from a convenience sample of 25 responses (1/3 of all trainees). The M:F ratio was 3:1. Twenty three graduates (92%) completed overseas fellowships. Mean Likert scores were clinical competency (4.8), basic science knowledge (4.9), evidence based medicine application (3.7), ability to work as academic supervisor (3.3), research skills (2.9), health economics (2.3) and health policy (2.3). Negative themes from qualitative analysis included the adverse impact of excessive service provision on training and the lack of structured career advancement. Most felt clinically competent compared to international colleagues.

Conclusion  Clinical competency is achieved through the HST program. Specific training is required for health management, policy and research aspects of training.

Background and Aims  There are significant differences in resuscitation algorithms for children versus adults. We aimed to enhance confidence of our students in the assessment and management of sick children by developing a simple program with emphasis on Basic Airway management, CPR, and clinical assessment and treatment of children using the A/B/C/D/E system.

The course consisted of three parts in small group sessions (10–15 students):
- BLS, basic Airway and Cardiac arrest management, lasting (1.5 h);
- DVD and serious illness scenarios on traditional mannequins (2h);
- Serious illness scenarios in the Simulation baby laboratory (0.5 h).

All participants were given a pre course hand out. The course was led by qualified APLS instructors and student confidence was evaluated by a pre and post course questionnaire.

Pre course 18.8% of the students would not feel confident to approach a situation with a sick child outside the hospital versus 3.2 % after the course. Three times more students felt confident managing a child outside the hospital. Confidence in assessing and managing common paediatric problems in hospital, increased by 22 %, with the greatest increase regarding children with respiratory and cardiac problems.

75% liked the mixture of lectures and practical sessions. Overall more than 80% felt they benefited from all different parts of the course. Confidence to approach, assess and manage a sick child increased by an average of 18.5%.

Medical students found the interactive resuscitation training useful. Formalized simulation and resuscitation training improved medical student confidence and equipped them for in and out-of-hospital paediatric management.

Background and Aims  The Higher Specialist Training (HST) program in General Paediatrics was initiated in 1999. The first graduates to complete the full program received their CSCST in 2008. There are 15 graduates per year. This study evaluated whether graduates believed core competencies of the HST curriculum were achieved and assessed their perceptions of its strengths and weaknesses.

Methods  The lack of an accurate database resulted in a convenience sample being utilized. Demographic data obtained included year of program entry and current position. The survey utilized a Likert scoring system (cuing at 1, not at all, cuing at 6, definitely) to evaluate the training process relating to clinical skills, research abilities, health economics. Qualitative questions allowed for personal reflections on the training process both positive and negative. Responses were analyzed for themes.

Results  The total workload of the course in undergraduate Paediatric Medicine held 10.07% of the total workload of the courses and their integration has occurred from the third year of graduation, with the primary health care settings primarily used in 98.75% of schools. The teaching plans demonstrate the enhancement of cognitive development in the learning process, with the psychomotor domain and affective ill-favored. The evaluation process found is focused on learning for students leaving a major void in the assessment of own teaching and their teachers. The practical evaluation of the teaching-learning of students is privileged only 15% of the courses and the assignment of concept is referred to in 87.5% of courses. We noted the will expressed by various schools and their parents, transformations aimed at improving education.

Conclusion  The understanding of the teaching of Pediatrics as a fundamental part of general medical education at undergraduate level may, in our view, contribute to the formulation of projects that encourage the construction of new avenues for improving the teaching-learning process in Pediatrics.