EBCOG-PACT

Project for Achieving Consensus in Training

Project Plan

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Summary

Objective
The main objective of this project is to create a high quality pan-European Obstetrics & Gynaecology training curriculum to improve and harmonize health care of women throughout Europe. There is a need for this as each country within Europe sets out its own training programs; therefore specialists in Obstetrics & Gynaecology from different countries acquire variable levels of skills. The implementation of a pan European curriculum will create a workforce with comparable skills and training to ensure patient safety. Such a development will also allow the free movement of specialists across Europe whose training has been quality assured.

Outcomes
O1. Core content and elective modules:
A curriculum comprising a core curriculum and elective modules.

O2. Societal and general skills for European gynaecologists:
A description of ‘general’ or ‘societally responsive’ skills every gynaecologist in Europe should have, identified by the specialist’s immediate colleagues. Nurses, midwives, hospital board members and patients will help to define the competences which every trainee in Obstetrics & Gynaecology must acquire during their training using the new curriculum.

O3. Strategy:
To integrate the contents of outcome 1 and 2 to form the core curriculum and elective modules as a package. In addition, an educational strategy and format of delivery will be developed.

O4. SWOT-analysis:
the objective of this exercise will be to gain insight into how easily the curriculum might be implemented in each European country.
The SWOT analysis will not only provide information for each country, but would also give a more general overview of the factors which stimulate or hinder the implementation of the new curriculum.
O5. Policy recommendations/guidelines:

At the end of the project, recommendations and guidelines will be formulated to ensure that the curriculum has been successfully implemented on a firm footing. Furthermore, recommendations will also be made as regards future regular updates.

O6. A Toolbox for the future:

A handbook describing the methodology used in this project will be designed to assist other specialties to design and implement a curriculum on a European scale.

E1. At the conclusion of the project, a Conference will be organised for the wider dissemination of the project’s outcomes and results.

Preface

The European Board and College of Obstetrics and Gynaecology (EBCOG) represent the National Societies of Obstetrics & Gynaecology of 37 Member Countries and are the voice of European gynaecologists.

It is well known now that significant discrepancies still exist in women’s healthcare between EU Member States. For example, the incidence of maternal death in some countries is 10 times higher than in others and the estimated incidence and five year survival rates for ovarian, endometrial, cervical and breast cancers also vary considerably between different countries. Such inequitable access to the delivery of healthcare has an economic and societal impact and there is a compelling need for improvement.

EBCOG is committed to improving the health of women and the newborn babies by promoting the highest possible standards of care and training. We have responded to the above challenge by publishing two documents, describing *Standards of Care for Maternity and Gynaecological services in 2014* and they were launched at the EU Parliament.

We are now embarking on second important project to develop a robust pan-European post graduate training curriculum in Obstetrics & Gynaecology. The implementation of such a curriculum across Europe will streamline the training within all the training units, thus ensuring that the health care delivered to women throughout Europe is of highest standard and in line with EBCOG’s aspirations. EBCOG is both proud and delighted to be undertaking this challenging, but crucial work.
The significant stakeholder input is very important and innovative, and will give us a holistic curriculum that fully covers all aspects of training in our specialty. No small task, I am sure you will agree. New Pan European training curriculum will be developed, with input from a wide variety of experts in Obstetrics & Gynaecology, medical education, doctors in training and users of the service across Europe. New curriculum will also form the bedrock of many of our other core activities such as visiting and accreditation of training centers and our Examination. Quality assurance of training will also support the EU Commission’s vision for free movement of quality assured medical specialists across Europe.

I would like to thank all of the partners who have so willingly agreed to be involved and I would like to give warm thanks to Prof Fedde Scheele and Dr Angelique Goverde for making a successful application for funding and getting this exciting project up and running.

I know it will be a great success and I look forward to seeing the final EBCOG Curriculum rolled out at EU level for the great benefit of a new generation of trainees and their patients. It will also, hopefully, act as a guide and template for other specialties thinking of producing their own curricula.

Dr Tahir Mahmood CBE
President of EBCOG

Introduction
Creating a new, fully up to date and future proof curriculum for postgraduate training in Obstetrics & Gynaecology means far more than a complete revision of the EBCOG Training Recommendations which were introduced and adopted in 1995 by the EBCOG Council. Over the years many subjects were added to the curriculum, as well as communication skills, and for operative skills minimal numbers of procedures to be undertaken by trainees were stated too.

However, despite all these additions, the training curriculum became outdated. Society and medicine are changing at rapid speed. Expectations of what doctors can and should be able to do are shifting, knowledge is progressing fast, and the doctor needs to address different skills (at least partially) in order to be responsive to these new demands. There is a need for a competency based training curriculum that brings together knowledge and skills in the medical domain, but also societal responsible skills and team working skills. Valued concepts from the medical educational field will be
applied to facilitate training for both the trainer and the trainee. Postgraduate training in Obstetrics & Gynaecology should be considered as the first step of a lifelong learning curve.

Defining the new training curriculum of Obstetrics & Gynaecology in Europe is a joined project of us all, with Professor Fedde Scheele as project leader, and doctor Jessica van der Aa as executive project manager, and supervised by the EBCOG Project Board. This project will challenge us to define which elements are truly essential for being able to work as a gynaecologist wherever in Europe, and which elements determine a more local or national demand of practice. It will also challenge us to define the new demands and responsibilities of doctors such as collaboration, health advocacy et cetera, in response to a continuously changing society. And finally, it will challenge us to use a competency based framework as the backbone of the training curriculum.

We are counting on your cooperation.

Dr Angelique J. Goverde
Chair EBCOG Project Board

Objective
The main objective of this project is to create a high quality pan-European training curriculum in Obstetrics & Gynaecology, and with this, to improve and harmonize health care of women throughout Europe.

There is a need for this, to allow free movement of specialists across Europe and therefore create comparable skills and training to ensure patient safety. Labour mobility for Obstetricians & Gynaecologists throughout Europe will be stimulated by pan-European training.

In this project, we aim to move from a tradition in which the medical world exclusively is deciding what is important, to a tradition of co-creation of the new curriculum, together with patient representatives and other societal stakeholders. The EBCOG council will be used to validate consensus steps throughout the project.
**Expected results**

We aim to deliver a state of the art training curriculum for all European trainees in Obstetrics & Gynaecology. A core curriculum will be designed, constructed of basic knowledge, skills and attitudes in Obstetrics & Gynaecology. In addition, elective modules will be offered for areas of special interest. Consensus on the contents and competences for core curriculum and elective modules will be translated into a blueprint for the European exam. The EBCOG training accreditation system will be revamped to meet the aims of the curriculum. This framework of curriculum and accreditation will be designed to strengthen the quality of care within the specialty of Obstetrics & Gynaecology in Europe.

The new curriculum is intended to be societally responsive. This means the content will be partially based on stake holder analysis amongst patients, community workers, midwives, nurses, hospital boards, governmental representatives and on a study of needs perceived by the professionals themselves. Moreover, the educational strategy will be based on the latest insights into workplace based learning, making use of modern technology to support learning and assessment, including faculty development.

EBCOG aims to be leading in specialist training throughout Europe.

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**Outcomes**

*Outcome 1 (O1)*

Core content and elective modules

*Curriculum for the members of EBCOG*

Initially a consensus procedure will be carried out to describe the core of the pan-European training curriculum in Obstetrics & Gynaecology, taking into account cultural differences between countries. Also, elective modules will be defined for specific areas of interest (e.g. Gynaecologic oncology, Urogynaecology, Assisted Reproduction, Treatment of Abnormal Uterine Bleeding, etc.). The partnership between six countries, representative of the different training structures, has been formed. This will provide an opportunity for stakeholders with different training styles and outcomes to reach a consensus about the best way forward.
**Outcome 2 (O2)**

**Societal and general skills for European gynaecologists**

**Course/curriculum**

A description of ‘general’ or ‘societally responsive’ skills every gynaecologist in Europe should have, will be drawn up by the gynaecologist’s immediate colleagues. Nurses, midwives, hospital board members and even patients can define which competences every gynaecologist trainee under our new curriculum must learn.

Examples of these skills are: ‘communication’, ‘system based practice’ and ‘patient centeredness’. These skills define the gynaecologist as more than just a medical expert, but rather as a doctor as a whole.

As part of the consensus process, the Danish and Dutch partners will assemble the input and integrate it into the content and strategy of the training curriculum.

**Outcome 3 (O3)**

**Strategy**

**Course/curriculum**

The contents of output 1 and 2, will be integrated with the educational strategy to create a core curriculum and elective modules. The skills and attitudes to be mastered by the trainee will be described according to the entrustable professional activities (EPA)¹. Consensus will provide multiple methods of assessment including the optimal use of simulation and e-learning, to support a system that fosters progressive independence. Formats for faculty development will be delivered and quality assurance will be clearly described. Experiences from leading countries in state of the art work-place based learning will be used. In consensus meetings the new curriculum will be fine-tuned and a blueprint for the European exam will be produced.

**Outcome 4 (O4)**

**SWOT-analysis**

**Study/analysis**

When the curriculum has been designed, a SWOT analysis will be conducted in each country to provide insights into how easily the curriculum can be implemented. To make a SWOT diagnosis for each country, a structured interview instrument will be designed, to collect data from the teaching school, clinicians and trainees. In most countries, elements of the desired curriculum already exist.

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The SWOT report will provide information per country, but also a more general view on the factors which will either stimulate or impede the implementation of the new curriculum.

**Outcome 5 (O5)**

**Policy recommendations/guidelines**

A pro-active policy for the future of training in obstetrics and gynaecology with the new curriculum will be formulated in a series of recommendations intended to ensure the sustainability of the curriculum. Also, a review of the project will result in the production of a set of recommendations for future updates.

**Outcome 6 (O6)**

**Handbook**

A handbook describing the methodology used in this project will be designed to guide other specialties to design and implement a curriculum on a European scale. It will contain the following chapters:

- Who is to benefit?
- Good reasons for a curriculum on a European scale
- Core and elective modules. Defining medical content. Pitfalls, tips and tricks.
- General competencies as a key feature, is our procedure worth the investments?
- Practical tips and tricks from societal partners for how to get their perspectives
- Notes on state of the art training, assessment, faculty development and quality care.
- Consensus to be reached. What are reasonable targets and how do you achieve them?
- Making recommendations. Using the knowledge of many involved.
- A reflection on making the handbook.

**Event 1 (E1)**

**End Conference for the dissemination of the project outcomes and results**

The Final Conference will be targeted at European gynaecologists, but also at delegates from other medical specialties and societal organisations in Brussels. During the Conference, the products (curriculum, quality care, faculty development, recommendations for the future and the handbook for other specialties) will be displayed and discussed from the perspective of sustainability. Scientific evaluations will be presented and will bring us to a higher level of understanding of the challenges and opportunities in European postgraduate medical training.
**Organisation**

A multi-disciplinary and integrated approach is needed to execute the EBCOG-PACT. Therefore, a consortium with a solid track-record on the latest developments in Obstetrics & Gynaecology, experience with the use of societal responsiveness and extensive experience with modern training technology has been put together. Besides this content, a mix of European cultures is necessary for a result that suits the majority of European countries.

Amongst other European countries, the Netherlands already have gathered knowledge and experience about the development and implementation of a curriculum with the involvement of different stakeholders (field organisations) and were chosen as ‘home country’ for the project.

Partners from six countries have been selected to create the best combination of knowledge, experience and practice, representing Europe at its best. All the partners are active members of EBCOG, with a long history of cooperation and strong professional relationships. Figure 1 shows the organisation of the partners in the project and their areas of special focus.

*Figure 1: Partner organisation*
To ensure a proper and effective project evaluation, two Advisory Boards have been formed (figure 2).

1. The Internal Advisory Board (by the partners involved) will evaluate the following items:
   - Content: Frequent evaluation of the content will be performed. Outcome 4 (SWOT analysis) will show to what extent adaptation to the new curriculum is expected and where obstacles are to be dealt with.
   - Methodology: All partners will be checked in semi structured interviews for their consent with the project.
   - Management: Evaluation forms after meetings will be used to evaluate whether communications have been clear and deadlines have been met.
2. The External Advisory Board focuses on output, budget and expected quality, performance and impact.

*Figure 2: Advisory Boards*
Communication
Every six months, a transnational project meeting will be held that will be attended by all partners to discuss the progress of the project. The project leader will report to the Project Board on a regular basis. Furthermore, three-monthly face to face meetings will be organised in conjunction with scheduled EBCOG Executive Committee meetings, at which the project leader, the executive manager and the partners present their intermediate results to the Project Board. A project website will be created to keep stakeholders and interested parties up to date and monthly newsletters will be provided.

Conclusion
This challenging project will create a Pan-European state of the art training curriculum in Obstetrics & Gynaecology, which will give an impulse to the development of a quality assured European workforce.

By improving the knowledge and skills of the (future) health care professionals, this project will have a sustainable impact on the lives of children, (pregnant) women and the elderly with gynaecologic problems.

From within the EBCOG family, we trust on your support, motivation and collaboration in realising this project. To ensure progression, we must commit to one another and synergize our expertise. With your support, EBCOG will be the leader in specialist training throughout Europe.

Partners

- The Athena institute of the Vrije Universiteit of Amsterdam, NL.
  Responsible person: Prof. Dr. Fedde Scheele, gynaecologist & Professor in Health Systems Innovation and Education.
  Roles: solid integration of the separate buildings blocks of the curriculum, change management strategy, project management.

- North Zealand University Hospital, DK.
  Responsible person: Dr. Peter Hornnes, gynaecologist.
  Role: gather and integrate perspectives from societal partners, to create a sustainable foundation in and outside of EBCOG. Represents the Nordic point of view.

- University of Turin, IT.
  Responsible person: Prof. Dr. Chiara Benedetto, gynaecologist.
Roles: discusses and democratically decides upon content of core curriculum and electives. Creates a sustainable foundation in and outside of EBCOG. Brings in the Southern European perspective.

❖ Institute for the Care of Mother and Child, CZ.
   Responsible person: Prof. Dr. Jaroslav Feyereisl, gynaecologist.
   Roles: discusses and democratically decides upon content of core curriculum and electives. Creates a sustainable foundation in and outside of EBCOG. Brings in the Southern European perspective.

❖ European Academy of Gynaecological Surgery (EAGS) & Hospital East Limburg, BE.
   Responsible person: Dr. Rudi Campo, gynaecologist.
   Roles: Brings in advanced training techniques and assessment methods. Creates a sustainable foundation in and outside of EBCOG. Represents the Western European perspective.

❖ EBCOG, BE.
   Responsible person: Dr. Angelique Goverde, member of the executive committee.
   Roles: serves as sounding board and source for ideas and solutions. Individual members may contribute to several projects and the EBCOG organisation has an important role in the change management needed to implement parts of the curriculum. Primary communication medium.

❖ ENTOG, BE.
   Responsible person: Dr. Anna Abakke, president.
   Roles: serves as sounding board. Brings in ideas and workforce to contribute to different tasks within the project.

❖ OLVG hospital (former Sint Lucas Andreas Hospital), NL.
   Responsible person: Dr. Hans van der Schoot, chairman of the board of governors.

❖ Inholland university of applied sciences, NL.
   Responsible person: Drs. Gea Vermeulen, Head of Midwifery Science.
   Roles: Midwifery perspectives and educational feedback and support.

❖ VUmc Amstel Academy, NL.
   Responsible person: Petra Kunkeler, senior teacher obstetrics/gynaecology/critical care obstetrics.
   Roles: Nursing perspectives and educational feedback and support.
- Stichting Geboortebeweging (active patient organisation with intensive involvement in obstetrics and women's health issues), NL.
  Responsible person: Joyce Hoek-Pula
  Roles: adding the patient perspective, also by connecting with other patient organisations throughout Europe and bringing in their views.