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TAME

Training Against Medical Error

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D1.3, Training plan, staff trained

D3.1, Training plan, writing new cases, staff trained

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1. INTRODUCTION

This deliverable combines D1.3 training plan and staff trainied and 3.1 training plan, writting new cases and staff trained and is divided into three sections, preliminary training and preperations, online and face-to-face (F2F) training subheadings details the components of each. These two deliverables are linked in terms of planning and training staff, elements of both are necessary when planning and training. The deliverable details the plans for training tutors who will be delivering the clinical Problem Baseed Learning (PBL) cases to students, staff who will be adapting and writing new cases, using the Open Labyrinth software. The plans outline what the training will cover, when it will take place and who should attend. The appendices provide additional information where needed.

Training will be provided for all Partner country (PC) participants. The document then dicussucs how a training lead will be appoined at each PC to train staff locally.

The plan also details how each partner country purchased the equipment required to set up their training and PBL rooms.

2. PRELIMINARY TRAINING AND PREPERATIONS

As the level of PBL knowledge and skills among the participants varies, preliminary training gives an opportunity to bring all PCUs to the same level and train them together at this stage.

The aim of this training is to train new tutors (participants who were not exposed to PBL facilitating before) in order to bring them at the same initial level as other PCUs already have and to help all PCUs to prepare suitable candidates for the case delivery in order to fulfil TAME project goals.

Based on the goals of the TAME project and experience from past projects the preliminary work was focused on:

1. Familiarisation of each PCU curricula, does the institution deliver PBL, if so have the teachers/tutors been trained in PBL methods and facilitation?
2. Selection and preparation of PCU candidates for training.
3. Refresher instructions were given to PCUs that had participated in the prevoiuse project.

The preliminary training was for those PCUs who had no experience in using online interactive VP cases (BSMU, HUMP and HMU). The training was delivered to Bukovinian State Medical University (BSMU) participants in order to give them the necessary knowledge and skills required for the online training. There were two parts to the training:

1. F2F workshop in Zaporizhia State Medical University (ZSMU), with visits of live PBL tutorials taking place in order to understand the main PBL principles and facilitating skills (Olga Cherkovska is the person responsible for ZSMU training arrangements).
2. Online training, followed by a Q&A session with St George's University of London (SGUL) / Karaganda State Medical University (KSMU) Trainer (Ella Iskrenko).

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Firstly, BSMU had an initial F2F training at the Medical education Centre (MEC) of ZSMU where they learnt what is PBL, how the PBL approach works, what types of PBL cases exist. Secondly, candidates were given online training for the interactive cases, how they work and how they are delivered to students. The agenda can be found in (appendix 7.1).

The training for Vietnamese partners (Hanoi Medical University (HMU) and Hue University for Medicine and Pharmacy (HUMP)) was tailored to their specific needs and combined as interactive and error online training. Some resources and assignments were given beforehand to the participants to help them prepare for the online training.

PCUs were required to identify teams of training participants who meet the criteria required for a tutor (appendix 7.2) and those who attended and passed all stages of the training (online and F2F).

2.1.1. Timeline

The training for BSMU took place F2F on 4-5th February 2016 at the MEC in ZSMU, and 17th February 2016 for the online training by SGUL (Ella Iskrenko)

The training for Vietnamese partners, HMU and HUMP was delivered online using the Omnijoin software on 4thMay 2016.

2.1.2. Who should attend the training

The candidates from PCUs who were never exposed to the PBL approach were invited to attend the training.

2.1.3. Results of the training

There were 6 BSMU participants trained at the MEC of ZSMU for the F2F training and 12 on the online training (6 previously trained + 6 new ones). During the project, additional sessions were run to complete the training of the trainers. This included a series of assignments, which they needed to pass in order to receive certification as a PBL 'tutor trainer'.

There were also a limited number of 'refresher training' sessions for PBL tutors in general.

There were 4 partners and 2 observers from each Vietnamese university , in total 8 teachers and 4 observers;

1. PBL curriclum and understand the basics of PBL approach were outlined
2. The types of PBL cases based on SGUL system: conventional and interactive ones were defirentiated
3. General structure and main principles of facilitating of branched cases were identifed

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3. ONLINE TRAINING

3.1. Introduction

Initially partners took part in the online training, which detailed how the training met the objectives of the project. This section is split into interactive PBL training, medical error PBL training and Virtual Patient (VP) authoring training that was delivered online.

3.2. Interactive PBL training

The interactive online training was tailored for the individual PCUs needs, based on the preliminary training results of some of the participants.

The training covered the main principles of PBL methodology, which are relevant for interactive (branched) cases; structure of branched cases; educational purposes behind interactivity. The agenda can be found in (appendix 7.3).

Online training was held separately for two groups of participants: 1st group – the Kazakh and Ukrainian participants; 2nd one - the Vietnamese participants. There were two reasons this was done this way; firstly, Kazakh and Ukrainian participants were trained and have some experience interactive PBL in previous projects. Secondly, they were trained in two languages (English and their state language, the trainer at KSMU provided the training in two languages). The Vietnamese partners were not exposed to the PBL approach before, so they were given a detailed explanation.

3.2.1. Timeline

The training for PCUs was arranged according to the project and partner requirements.

- The initital online session took place one 15th March 2016 with Ukrainian and Kazakstan partisicpants.
- HUMP and HMU took place on 4th May 2016
- This training was delivered online using the Omnijoin software.

3.2.2. Who should attend the training

The training should be attended by tutors and teachers who had no previouse expirience in facilitating branched cases; an explanationation of delivering the VP PBL cases within their institutions and also those who will be tasked in training more people from their own insitutions.

3.2.3. Results of training

There was a 40 minutes presentation by Dr. E. Iskrenko (Poulton) followed by Q&A session (30 minutes)

Outcome: the participants were given the information about main differences between conventional and interactive PBL; prinicples of PBL approach for facilitating interactive cases and the structure of branched cases were identified; also particular qualities of facilitation skills for interactive cases were explained: the main aims of using options, the significance of understanding and using the maps in branched cases

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3.3. Error cases Online Training

Following the training/ refresher session for Interactive branched PBL cases, an online session was provided to all PCUs to describe the theory behind medical errors, provide an overview of the structure of the medical error cases, how they should be facilitated. The agenda can be found in (appendix 7.4).

Nessecary documents for the preparation were provided to the participants (appendix 7.5). Brief introduction identifed the main purpose of the training, followied by a presentaion about 'Error in Medicine', some theory and statistics linked to medical error; the improtance of avoiding error and the awareness of errors in real practise was outlined. A discussion identifyed any items for clarification.

The particpants were given the information about the purpose and process of the TAME project, relevant for clinical tutors training, to help the traineers understand and identify their roles and responsibilities.

The main approaches of facilitation skills while using Error cases; what are the differences in the ways of tutoring interactive and clinical cases; learning objectives (LOBs) creation; developing clinical knowlege and metacognitive approach for working with the students in error cases, were given.

The final discussion took place about predicting the types of difficulties while dealing with error cases: what is the best approach to talk about incorrect thinking, talking about taking wrong desicion; reflecting on this.

From this participants gained an understanding of how error cases are structured and how they should be facilitated with students in a PBL setting.

3.3.1. Timeline

The continuation session with Ukrainian and Kazakstan partisicpants took place on 15th March 2016.

Partners from Vietinam were provided with a recoding of the Medical error presenation and invited to an online session on 4th May 2016 following their online interactive training.

Additional session were provided where necessary.

3.3.2. Who should attend the training

Participants from all PCU who have been chosen by the insitution should attend. Participants-TAME tutors and programme facilitators (Workshop leaders: Ella Iskrenko and Jonathan Round).

3.3.3. Results of the training

After the training, the participants were able to:

1. Understand the principles of Medical Error and theory behind it
2. Know about the importance and avoidance of medical errors in clinical medicine
3. Outline TAME project's main goals and intended outcomes
4. Identify the facilitation skills useful for delivering TAME teaching
5. Outline the main directions of implementation of interactive facilitating skills in TAME clinical D-PBL cases

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3.4. Virtual Patient (VP) authoring training

This section forms part of deliverable 3.1, training plan for wirting new cases and training staff. The aim was to train two case writers/subject matter experts from each instutituon, in wirting new error case and using the Open Labyrinth (OL) software. Online sessions were provided for staff to train them on using the OL software. This included how to create new case from the begining. Adapting exisiting cases to meet the needs of the individual institutions. It was also envisaged that those within the institution who are trained in using OL will provide further training to others withing their institution.

3.4.1. Timeline

Training was provided in stages to partners when necessary throughout the project to support staff from each institution to create and adapt the cases. Online sessions will be arranged during the course of the project as and when required.

3.4.2. Who should attend the training

This training is aimed at those who will be responsible for adtapting and creating cases using the OL software.

3.4.3. Results of the training

- An introductory session was held with the partners from Vietnam, which showed them the OL software, what it looks like, the feature of it and how it is used. Partners were shown how to create a case.
- During the F2F meeting in London – 4-8 June 2016 a session was held for partners to provide an overview of OL and give the participants a change to use the software and understand the principals of it.
- During the F2F session for case writer train in London on 5-6th December 2016, participants were shown how to use the software. At this stage of the project, it is envisaged that participants would have already been using the software to translate and adapt the Paediatric cases, therefore, requiring little training.

4. FACE TO FACE TRAINING

4.1. Introduction

This plan covers how the second part of the training (F2F) was arranged in order to give the participants opportunity to get a real experience of facilitating the clinical cases using PBL approach for interactive error cases while working with the students.

The training was arranged in the MEC of each country where participants from the national universities were be trained together. Each PCU needed to choose their participants based on the criteria outlined in appendix 7.2. Following the online training, some intermediate assignments were given to the participants to make a smooth transition between online and F2F training. An example of an assignments can be found in appendix 7.6.

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The training was split in two groups:

- Practising/improving interactive PBL facilitating skills
- Implementation of clinical PBL skills in D-PBL error case.

In addition to the PBL training, a session was arranged for PCUs in London to learn how to write new error PBL cases and use the OL software. Details are in section 4.4 of this document.

4.2. Interactive PBL training: tools and skills

The training started with a detailed presentation to recap participants of all the necessary details required for facilitating TAME cases.

Following this, the participants had an opportunity to discuss PBL interactive methods and difficulties when working with the assignments in the buzz groups (groups of 2-3 people working on a specific task) and all together with facilitator. This helped participants to be prepared for working with students. After the Q&A session, participants had the opportunity to work with the student groups.

The main purpose of this part of the training is to give all participants equal opportunities for practising or improving their interactive facilitating PBL skills and to identify which skills are more useful for clinical cases, which skills need to be improved or developed.

The participants were taken through the following:

- PBL facilitation: revising the theory and practising received skills through running of a case
- Discussing the Role of a tutor in facilitation of interactive PBL cases throuh SWOT (strength, weakness, opportunities and treats) analysis approach
- Understanding Group dynamics while discussing the errors: anticipate common and specific issues

Two groups of students were arranged for training, by the MEC. Agenda of the training can be found in appendix 7.7 (for Kazakh and Ukrainian universities).

The Agenda for the Vietnamese universities was modified as the training was tailored for their needs due to following circumstances; both Vietnamese universities did not have any exposure for PBL training before. The agenda can be found in appendix 7.8.

After the interactive PBL session, the outcomes were identified, (achievements and challenges) and discussed with the groups

At the end of this participants will have refreshed and practised how to facilicate interactive PBL cases.

4.3. Error cases Training: D- PBL approach in facilitating clinical cases

The participants went through an error case with the students practising their facilitating skills in a clinical scenario.

This part of the training was about how to apply the skills of interactive PBL to facilitate the clinical error case. Participants were given a brief recap of the structure and unique qualities of the TAME error case,

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their learning objectives and how to use the map. Following this participants had an opportunnity to work with the students applying their knowledge and skills about facilitating D-PBL to the error cases.

The participants worked with the clinical group of students for two days. There are two tutorials: 1st one - the beginig of the case on the fisrt day: working throught the scenario, discussing and choosing the options; creating the LOBs. The second tutorial on the second day of training: starting with the students feedback; identification of the clinical errors while discussing the management and summarising their findings. Working with the students, traineers will be able to practice D-PBL facilitating skills and apply them to a clinical scenario.

A Joint tutor and students discussion followed the training session to allow opportunities to exhchange opinions and gain different points of view.

The group outcomes was idenitifed based on the discussion and assigments executions. Individual reflective appraisals were discussed with each participant in feedback session.

4.3.1. Timeline

Both the above session in 4.2 and 4.3 of this document will take place at the same time during two days training session.

- Kazakhstan - 28-29 March 2016
- Ukraine - 16-17 May 2016
- Vietnam – 26-27 May 2016

4.3.2. Who should attend the training

As this is the second part of the whole process of TAME training, the participants trained online should attend F2F training

4.3.3. Results of the training

The results of the practising of facilitating skills in students groups were discussed; SWOT analysis was done: strength, weakness, opportunities and treats were outlined; group and individual directions for improvement were identified.

After the training sessions, the PBL workshop leader summarised each participant's achievement and identified his or her strengths and weaknesses as a PBL tutor.

Participants were given a certificate for attending and completing the training.

4.4. Training for writing new cases and using the OL software

This F2F session was a hands on experience for participants, to gain an understanding of how the use to OL software for writing new cases. They learnt how to create a case from the start and how to adapt cases when necessary.

The training took place over a one and a half day at St George's University of London. The schedule is listed in appendix 7.9.

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The training covered what medical error is, the types of medical error (deliverable 1.2), how to write an error VP case, and how it is structured. Enabling new case writers to understand the necessary principals of case writing for the PCUs to create their new error cases in their chosen subject areas. Case writers were asked to come prepared to the training with draft outline of the their cases so that they could start writing a case.

4.4.1. Timeline

The training will took place on 5-6th December 2016, before the PCUs started to write their own cases.

4.4.2. Who should attend this training

This training should be for those who are responsible for writing new cases and are then able to share their learning with others in their institution

4.4.3. Results of training

Fourteen participants attended the training from the partner countries held on 5-6th December 2016. Participants were given a recap on how to use OL, medical error cases and how they are structured. During the sessions participants asked questions and discussed how medical error can occur and how they can be included into VP cases.

Participants had the opportunity to start writing their own cases in their chosen subject areas, they worked in groups from their institutions and they came prepared with the knowledge about their cases and what was to be included in them. After some time each group highlighted the progress they had made on their cases and feedback was provided to them. They were guided on how the case could be improved and tips and suggestions were given to help them when they complete the cases.

After the training, participants were tasked to training further cases writers within their institutions and continue to write the cases in their chosen subject areas. Further support will be provided on an ad hock basis to those who require it.

5. TRAINING LEADS IN EACH PC AND FURTHER LOCAL TRAINING

This section details how a training lead was chosen in each PC and how they then training further staff locally.

5.1. Selection of training lead

As a result of F2F training sessions,individual meeting with the participants will be arranged. The main aim of the meetings was to discuss the individual reflective appraisals in the feedback session. It also helped to identify the candidates for training leads in each PCUs.

Following the original training session, confidential reports were provided to each PCMU project leaders, detailing the outcomes of the training, and advising on which of the traineers might be suitable as ‘tutor trainers’ for their institutions.

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In order for trainees to be recommended as tutor trainers, they were required to haves score of acceptable or excellent. The criteria for which the trainers were assessed are shown in table 1.

Criteria Scoring	Criteria: Understanding of PBL approach and Adherence to fundamental PBL principles while facilitating D-PBL cases	Criteria: Ability to Implement and evidence /use facilitating skills in clinical D-PBL cases
1. Excellent: 2. Acceptable 3. Cause for Concern 4. Unacceptable	• refraining from teaching • student–orientated approach • team work • self-directed learning • creating learning objectives	• minimal intervention in students discussion • using different types of techniques engaging and disengaging (verbal, non-verbal) • prompting questioning • encouraging clarifying, guiding

Table.1 Criteria and scoring system for the Training leads assessment

Once the candidates for training leads were identified and aproved from both sides (the TAME trainer and PCUs coordinators/leaders) additional sessions were held with D-PBL tutor trainers to support their understanding of the process and to provide the trainers / tutors with opportunities to ask questions.

The training was arranged both online (throught Facebook group (FB group) and individual skype/ email consultation) and at TAME meetings, such as the workshop arranged in Hanoi (10th November 2016) that gave an opportunity for tutors to share and obtain experience, discuss challenges faced by teams and create a strategy for overcoming them.

Having successful experience from ePBLnet project a Facebook group is considered an effective tool for further training leads.

During the project, additional sessions were held to complete the training of the trainers. This included a series of assignments, which they required to pass in order to receive certification as a D-PBL ‘trainer lead’.

Timeline

The training was arranged between June- October 2016 before the begining of implementation of TAME cases in new academic year.

The main direction of further training given by TAME trainer (Ella Iskrenko) for all PCUs though each university will be flexible in individual implementation in terms of timing and number of activities based on individual cirtcamstances and achievments. All tutor train will need to be completed before the PCUs delivery the cases.

5.2. Further training of local staff

5.2.1. KSMU

“D-PBL” training at KSMU

D.1.3. Training Plan, D3.1 Training plan, writing new cases, staff trained

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Karaganda State Medical University's team has completed the training of new tutors for implementation paediatric cases with medical errors and delivery d-PBL tutorials. Overall training of medical teachers at KSMU had several stages:

First stage

The main purposes of the training were:

- To refresh understanding and facilitating skills for interactive PBL cases (d-PBL cases)
- To introduce clinical errors cases: structure and specificity of facilitating skills

Kristina Dobler, at KSMU provided lectures on d-PBL cases management, concepts of d-PBL cases, described the facilitating method and explained difference between PBL-sessions and traditional methods, and discussed the role of the tutor and the students in these tutorials.

6- year "General Medicine" students of traditional teaching and learning classes, have been invited for the training. During the training, the teachers replaced each other one by one, applying derived facilitating skills to practice. K. Dobler, as leading tutor, observed and coordinated the training process. At the end of the session, the trainer gave a feedback to all tutors in the group and individually, to discuss strengths and weaknesses of the training with each tutor.

Timeline

Training on d-PBL using Ramadan Galymzhan case (original name is Rory) on 16-17 th September 2016. (Annex 1. Agenda of the training).

Participants of the training

Trainer: Kristina Dobler, KSMU
1. Akbota Kysabekova, Department of Children Disease 1
2. Ayman Isayeva, Department of Children Disease 2
3. Gulsharbat Alshinbekova Department of Children Infectious Disease
4. Aizhan Sersauletova, Department of General Practitioner 1
5. Karakoz Amangeldieva, Department of General Practitioner 2
6. Zhandarbek Kalbekov, Department of General Practitioner 3 with nursing
7. Aizhan Beysenaeva, Department of General Practitioner 1
8. Bakhtiar Otinshiev, Department of General Practitioner 3 with nursing.

Training results

- Tutors trained with 6 year students and test facilitating skills;
- The challenges of facilitation were discussed;
- The challenges were discussed and wasy of overcoming them identified;
- Tutors taught in the Kazakh language were trained too.

Second stage

Advanced d-PBL training

The purpose of the training was further development of already trained tutors before exposure to real tutorials.

6 groups of the students with total 6 students in each group were arranged to work simultaneously with 6 paediatric cases. Cases have been translated and adapted already and ready for the use at this stage. There were two tutors in each room, replacing each other and at the middle stageof training. Each session was video recorded.

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At the end of the training the feedback from students were received. Afterwards, tutors discussed the issues and the challenges, which they faced while delivering the cases and exchanged with the opinion on facilitation.

KSMU trainer observed all recorded sessions and provided feedback according to checklist for each tutor. Every tutor received video and individual checklist with feedback.

Timeline
Advanced d-PBL training took place on 12 -13th October 2016

Participants of the training
Trainer: Kristina Dobler, KSMU6 tutors previously trained by Ella Iskrenko and 8 new tutors were trained by Kristina. List of participants is appendix 10.

Training results

- Each tutor has a chance to facilitate a turorial independantly;
- Each tutor received feedback and recommendations for improving his facilitation skills based on the video viewed by the trainer;
- KSMU trainer identified the strengths and weaknesses of each tutor for further improvement.

Third stage

Local training on writing new cases
According to Work plan of the project, each PCU need to provide "Writing an error Virtual Patient" training locally (appendix 11).

The purpose of the training

- To discuss with the tutors types of medical errors
- To teach the tutors writing the perfect error Virtual Patient
- To practice in writing own clinical scenario in Open Labyrinth

Timeline
"Writing an error Virtual Patient" training took place on 5-6th January 2017 at KSMU.

Training participants
6 tutors previously trained by Ella Iskrenko and 8 new tutors were trained by Kristina. List of participants is appendix 10.

Training results

- Tutors discussed types of medical error
- Tutors wrote own clinical scenario in Open Labyrinth

5.2.2. AMU

The training of tutors in AMU was arranged in 3 stages:

Stage 1 (preparatory)
The AMU team selected 5 teachers for TAME trainings: three pediatricians (Ainur Syzdykova, Riza Nurpeissova and Saule Zhumambayeva), two general practitioners from family medicine department (Meruert Zhakupbekova, Zhanagul Bekbergenova).

PBL trainer of AMU, Khamchiyev K. M. conducted the first training in order to familiarize the participants with main PBL principles (February, 2016).

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Results of the training

1. Familiarized with main PBL principles
2. Defined the meaning “tutor” and its role in PBL

Stage 2 (educatory)

The above-mentioned tutors were trained online in the frameworks of this project (Jonathan Round) and in March, 2016 tutors had F2F training by Dr. Ella Iskrenko in KSMU, Karaganda. DBP trainer (Zhanagul B.) was chosen for further tutor training in AMU after trainings and recommendations made by Dr.Ella Iskrenko.

Zhanagul Bekbergenova arranged the training for 3 new tutors of AMU (Danara Suleimenova, Xenia Schneider, Aigerim Zhuzhasarova) on 10-14 September, 2016. During the training Zhanagul made a presentation "TAME: from theory to practice", involving previously trained tutors. After the presentation, the participants had opportunity to discuss the main questions of TAME-cases, the specifics of TAME sessions. For this, 6 students were involved on order to work out TAME practical skills in the student group. Case Rory Gallaher was taken as an example. At this stage, Zhanagul conducted the demonstrative session on her own and tutors observed the process followed by discussion at the end. Thus, in total 8 tutors were trained at AMU for sessions with pediatric cases.

Results of the training:

1. Trained 3 more tutors
2. Defined facilitating skills
3. Tutors familiarized how to conduct TAME sessions

Stage 3 (practical)

At this stage, every tutor conducted the session under the supervision of DPBL trainer Zhanagul. The sessions took place on 20, 23, 27 September 2016 with Year 6 students of General Medicine faculty, branched cases Rory G. and Bella were used. All sessions were recorded on CD for further analysis. The tutors were devided into 3 days. Every tutor had the opportunity to practise own part of TAME session and Zhanagul worked by turn with each tutor and observed the process of TAME session.

The aim of this practical stage was to give the participants the opportunity to develop the tutor skills. After the training, tutors discussed difficulties, mistakes and challenges which occured during TAME teaching. Zhanagul assessed the strengths and weaknesses of each tutor for further monitoring. In an open dialogue tutors were given recommendations.

Results of the training

1. Practiced facilitating skills with each tutor.
2. Discussed the questions for further analysis.
3. Discussed the difficulties and challenges which tutors faced

Challenges identified after the practical steps:

- With teaching: formulating LOBs, the senior students were very self-confident and were ready to make the diagnosis, frequent error of students was "bravado”
- With students: Bella- the students lost the interest in the case, when saw diagnosis, lack of clinical thinking
- With cases: Rory Gallaher is very specific for Kazakhstan.

Internal workshops

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Zhanagul is a trainer for tutors in AMU. She organized workshop for new tutors on the 10-14 September, 2016. Early trained tutors participated in this workshop where Zhanagul prepared presentation about TAME technology. Then the trainer conducted demonstrative lesson on TAME technology for newly trained tutors. After the demonstration lesson Zhanagul conducted a small round table to discuss the main points in the TAME technology. After two groups were organized including new trained and early trained tutors (The trainer divided all tutors into 2 groups of 3 people in each, so that each group has at least one early trained tutor). They gave directions to new tutors during their sessions. At the end Zhanagul and experienced tutors gave some comments.

5.2.3. ZSMU

The training of local staff at ZSMU was arranged in two stages: the first training took place on 4-7 July 2016, the second stage - 15-16 September 2016. Both agendas of the training can be found in appendix 7.12. The training was conducted by Olena Furyk – associate professor of the Infectious Diseases department.

1 stage. Teachers from the Propaedeutic of Children diseases department, the Children Disease Department of Post-graduate Education Faculty and the Hospital Paediatry Department participated in this training. 2 groups (8 persons in each) of 5th year students of the medical faculty took part in the training. Olena Furyk delivered a lecture on PBL followed by staff training on linear case. After that teachers had an opportunity to practice teaching on linear cases with the group of students. The second lecture on medical errors and working with clinical cases was delivered. The lecture was followed by the D-PBL training.

2 stage. The second training took place on 15-16 September 2016 with four tutors who were trained earlier and one group of students (8 students).

D-PBL case with errors (Rory Gallagher) was used in the training.

The results:

- 6 Paediatric tutors were introduced to the PBL and trained for the work with clinical cases with errors
- The tutors were trained in delivering clinical D-PBL cases with errors
- The tutors applied their knowledge during training sessions and practiced facilitating skills in PBL approach in clinical sessions
- After the 1st stage of training all tutors received a certificate of attendance, and after the 2nd stage – they received the certificate of participation
- The experience and results of the ZSMU tutor team were presented via TAME trainers Facebook group
- The surveys for 24 students' and 6 tutors' were created (the results of the survey can be found in appendix 7.13).

Internal workshops:

There were two stages of the workshop in ZSMU:

The 1st stage of training in ZSMU was organized for those who were going to participate in London meeting – Oleksandr Kostrovskyi and Andrii Bilyi on 29.11.2016 (appendix 7.14). Themes and outcomes for the new cases were discussed and determined.

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The main training on cases writing took place on December 5-6, 2016 at SGUL in London. The representatives of ZSMU successfully took part in the training. Everyone interested to participate in writing cases in the frames of TAME project (surgeons) were invited for interview. 3 surgeons were preliminary chosen.

2nd stage

Olena Furyk delivered a lecture on "Training against medical errors based on Virtual Patients" for the surgeons. Kostrovskyi O. and Bilyi A. shared their experience gained during the training in London with the participants of the training.

New participants attended the tutorials for better understanding the points and aims of the project and structure of branched cases with medical errors on 08.12.16, 20.12.16 and 22.12.16 (appendix 7.15).

The group on surgical cases writing was formed:

- Oleksii Kapshytar , Assistant Professor of the Department of General Surgery;
- Oleksandr Voloshyn, Assistant Professor of the Department of Hospital Surgery;
- Andrii Bilai, Assistant Professor of the department of Faculty Surgery.

Oleksandr Kostrovskyi, Associate Professor of the Department of otorhinolaryngology, was appointed as the responsible person for new cases creation process.

The themes and the main objectives of the new cases are reconsidered, the themes of the cases are shared between the surgeons.

The outcomes for new cases are reviewed and reconsidered.

The surgeons started the case writing process.

5.2.4. BSMU

Some tutors attended the F2F training on 4-5 February 2016 at ZSMU in Zaporizhzhia (Ukraine). This was the initial lecture was devoted to the principles and features of problem-based learning and trainings for teachers for self-teaching experience under this methodology. The aim of the training was to introduce problem based learning to BSMU. The training was conducted by Associate Professor of Surgery Cherkovska Olga. 6 tutors from BSMU (Bilous Tetiana, Bilyk Galyna, Garas Mykola, Sazhyn Sergeii, Shakhova Olga, Tarnavska Svitlana) attended.

Following this there was an online session on 17th of February 2016 and was conducted Dr. Ella Iskrenko-Poulton and Dr. Jonathan Round about PBL methodology. 12 tutors from BSMU attended; Garas Mykola, Tarnavska Svitlana, Bilous Tetiana, Bilyk Galyna, Shakhova Olga, Sazhyn Serhii, Ortemenka Yevgeniia, Marusyk Uliana, Khilchevskaya Viktoriia, Ivanova Lorina, Bogutska Nataliia, Vlasova Olena.

A TAME online training (workshop) took place on 15th March 2016, conducted by Dr. Ella Iskrenko-Poulton and Dr. Jonathan Round about principles of Medical Error and facilitation skills useful for delivering TAME teaching. This was attended by 6 staff from BSMU which included; 4 participants (Bilyk Galina, Sasyn Sergij, Garas Mykola, Bogutska Nataliia) and 2 observers (Bilous Tetiana, Tarnavska Svitlana).

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F2F training for tutors at BSMU was on 16-17 May 2016 in the MEC at ZSMU in Zaporizhzhia (Ukraine), delivered by Ella Iskrenko-Poulton. The participants were given the information about main differences between conventional and interactive PBL, principles of PBL, structure of branched cases, particular qualities of facilitating skills for interactive cases and the significance of using the maps in branched cases. Bilyk Galina, Sasyn Sergij, Garas Mykola, Bilous Tetiana attended the training.

A F2F training session took place on 4-8 June 2016 in London (UK), which was attended by Tetiana Bilous, Bilyk Galyna and Igof Gerush. This session was part of the F2F project meeting, and covered using Open Labyrinth and adapting cases.

Training for tutors at BSMU was conducted on 7, 9 September 2016. The agenda of the training can be found in appendix 7.16.

The training was organized and conducted by Galyna Bilyk – assistant of the department of paediatrics and children's infectious diseases, BSMU. The training was attended by 6 year students (2 groups – 8 students, specialty 'Pediatrics'). The training was for the tutors who participated (4 participants) were trained at the medical education centre in of ZSMU, attended the on-line trainings and face-to-face training with the participation of Ella Iskrenko and Terry Poulton. The other six participants did not have any experience of working with PBL method.

List of the participants:

1. Bilous Tetiana – associate professor of the department of paediatrics and children's infectious diseases
2. Garas Mykola - associate professor of the department of paediatrics and children's infectious diseases
3. Sazhin Sergii - associate professor of the department of paediatrics and children's infectious diseases
4. Shachova Olga - assistant of the department of paediatrics and children's infectious diseases
5. Tarnavska Svitlana - associate professor of the department of paediatrics and children's infectious diseases
6. Vlasova Olena - assistant of the department of paediatrics and children's infectious diseases
7. Khilchevska Victoria - associate professor of the department of paediatrics and children's infectious diseases
8. Marusyk Uliana - associate professor of the department of paediatrics and children's infectious diseases
9. Bogutska Natalia - associate professor of the department of paediatrics and children's infectious diseases

   The training was carried in friendly atmosphere.

For the first day of training a lecture about the TAME project, its aims and process were discussed and why Error in medicine is improtant. To start with a linear PBL case was used, of the child who has mucoviscidosis (this case was used in PBL project). Before the PBL session with students the lecture for tutors entitled "Problem-based learning, principles and approaches. Role of tutors and students" was read. The tutors had a lot of questions about PBL method and tried to put themselves in the place of the students.

During the PBL session the students actively participated in the discussion and analysis of clinical case. During the first part of the day with students, tutors who attended the face-2-face trainings in Zaporizhia started off the session. Then new tutors had some practical experience in delivering the sessions. At the

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end of the day the tutors discussed the problematic issues and expressed their opinions about the first day of training.

The second day of training started with feedback from the tutors and discussed elements of the previous day. Tutors were present at the lecture "TAME – the project purpose and processes. Error in Medicine – why is this important?. Before the classes types of medical errors were discussed with students.

For the second day of training clinical D-PBL case Rory Gallagher was used. It was much more difficult for students in comparison with the linear case. Tutors had the opportunity to improve their practical skills. At the end of the second day from students and tutors feedback was received. Individual reflective appraisals were discussed with each participant in feedback session.

Difficulties features in training for tutors and students:

- Absent of experience (tutors and students)
- Most tutors have extensive teaching experience, it is difficult to change the style of teaching (tutors)
- Difficulties in analyzing and structuring of information (students)
- A lot of materials on one slide (students, tutors)
- Many different topics in one case (different disciplines)
- It is hard to work in a team and hear one another (students)
- Difficulties with formulate homework (students)
- Unable to help students during the session (tutors)

Results of training:

- The methodology of studies on PBL method;
- Tutors informed about the grant project –TAME;
- Training delivered with tutors and students;
- Discussed positive and challenges features, of the delivery of the cases;
- Received feedback from the students and tutors about the training.

After training most of the students expressed a desire to continue their studies by the PBL method in clinical cases with errors.

Internal workshop for writing new cases

Training on creating virtual patient is scheduled to be held 1-2 February 2017 and based on the principles PBL and results of the training 5-6 December 2016 in London, the UK (University of St. George). The training will be attended by team members, case writers. It will contain an introductory lecture on the types of medical errors, PBL methodology, and creating virtual patient cases. Case topics will be distributed among participants; deadlines set.

The expected results of the training: the formation of working teams to create virtual patient cases, the acquisition of skills on writing case studies of medical errors.

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5.2.5. HMU

Tutors went through error case with students practising their facilitating skills in clinical scenario. Tutors had chance to apply their skills of interactive PBL to facilitate the Rory Gallanger case. Tutors worked with the Rory Gallanger case for 2 days. Day 1: Introduced about LOBs for 18 tutors (The list of participants can be found in appendix 7.17) from Pediatric Department, discussed case study Rory Gallager, created the LOBs. Day 2: Tutors were chosen from 18-trained tutors and worked with the clinical 6th years students. Each tutors had 10-15 minutes to practice on PBL. At the end of the training, all the tutors had time to discuss their feedback. Dr. Dzung and Dr. Huong summarised each tutors strengths and weakness. The training took place over 2 days: 19th October 2016 and 26th October 2016. For more details, please find appendix 7.18.

Internal workshops

We have already organized an internal meeting in HMU in 28th, December 2016. The main purposes of the internal meeting is to share experience about creating new cases on OpenLabyrinth and LOBs teaching method for tutors in the infectious department. There were a total of 5 tutors in the infectious department and 3 tutors in the paediatric department involved in the meeting. Prof. Le Thi Huong, Director of the Institute for Preventive Medicine and Public Health and Assoc Prof. Tran Xuan Bach, TAME HMU coordinator were also present in the meeting. After presentations of Dr Dung from Paediatric department. All tutors had chances to discuss and practice directly on the computer. For more detail, please refer to appendix 7.19

5.2.6. HUMP

Objectives: By achieving good results from the face-to-face training on VPs methodology in Ha Noi, Dr Le Van Chi and Dr Ton Nu Van Anh have been assigned to be the moderators for training other tutors at Hue UMP. The Tutor to Tutor (ToT) training aimed to develop further tutors on teaching virtual patient cases using PBL methodology and Open Labirynth software for later implementation of paediatric cases at Hue UMP.

Time line: The training took place from 17 to 18 October, 2016 at Hue UMP.

Participants: There were 8 participants who took part in the training. Two of those were paediatrician, 2 surgeons, 2 OB&GYN specialists and 2 internists. All of them have attended at least one seminar or workshop on Active Learning or e-Learning; 3 of them have had the chance to study in an academic environment abroad (Japan, Canada, France). The following issues were taken into consideration for selecting the participants:

- Actively engage in clinical teaching
- Experience in clinical teaching
- Young and motivated to deal with the challenges of a new teaching method
- Good in English

The agenda and some results can be found in appendix 7.20. Below is a table showing the participants of the training sessions.

No	Name of	Major	Roles	English

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	participant			proficiency
I. Trainees				
1.	Tran Thi Phuoc Yen	Neurology - Internal medicine	Worked as PBL tutor in linear cases and as PBL tutor in branched cases	Advanced
2	Le Minh Tan	Gastrointestinal - Internal medicine	Worked as PBL tutor in linear cases	Intermediate
3	Phan Dinh Tuan Dung	Surgery	Worked as PBL tutor in linear cases	Advanced
4	Bui Doan Van Phu	Surgery	Worked as PBL tutor in linear cases	Intermediate
5	Truong Thi Linh Giang	Ob&Gyn	Worked as PBL tutor in linear cases	Intermediate
6	Nguyen Hoang Long	Ob&Gyn	Worked as PBL tutor in linear cases	Intermediate
7	Nguyen Huu Chau Duc	Peadiatrician	Worked as PBL tutor in linear and as PBL tutor in branched cases	Advanced
8	Ho Ly Minh Tien	Peadiatrian	Worked as PBL tutor in linear cases	Intermediate
II. Observer				
1	Vo Van Thang	Project manager	Worked as PBL tutor in linear cases Worked as PBL tutor in interactive cases Was trained as PBL tutor	Advanced

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2	Nguyen Van Hung	Project co-ordinator	Worked as PBL tutor in linear cases Worked as PBL tutor in interactive cases Was trained as PBL tutor	Advanced

Results:

In general, all 8 participants have actively and enthusiastically participated in the training course. They are aware of the principles of PBL-D and VPs. They are also highly confident in using OL and adapted paediatric case to work with students. However, they need more practice of using this methodology to enhance their confidence and to improve their effectiveness of teaching methodology.

Specifically, feedbacks from students and moderators have shown that each participant had their own strengths as well as weaknesses that need to be continuously practiced and improved. Following is the brief remarks for each.

No	Names	Major	Strengths	For improvements
1.	Tran Thi Phuoc Yen	Neurology – Internal medicine	- Understands the process of PBL in general - Very good in working with the students	- Should better facilitate the students arguments - Be more directive
2	Le Minh Tan	Gastrointestinal – Internal medicine	- Understands the process of PBL in general	- Be more confident
3	Phan Dinh Tuan Dung	Surgery	- Understands the process of PBL in general	Too many questions for the students
4	Bui Doan Van Phu	Surgery	- Understands the process of PBL in general	- Needs more practising in facilitating skills; - Be more confident
5	Truong Thi Linh Giang	Ob/Gyn	- Understands the process of PBL in	- Too many questions for the

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			general - Very good in working with the students	students - Be more directive
6	Nguyen Hoang Long	Ob/Gyn	- Understands and likes the process of PBL in general	Be more confident
7	Nguyen Huu Chau Duc	Peadiatrics	- Understands the process of PBL in general - Like what he is doing	- Be more directive
8	Ho Ly Minh Tien	Peadiatris	- Understands the process of PBL in general	- Needs more practising in facilitating skills; - Be more confident

5.3. Analysis of further local training

During the local training, trainers were asked to film their training sessions, the purpose of this was to analyse individual tutors' achievements and send the videos and trainers notes to the TAME trainer. The TAME trainer watched the videos, analysed the training process, and discussed the results of the training with each PCUs trainer individually. The joint discussion enabled to identify the strong sides and directions for the improvements for each tutor, these results were provided to the local teams so they could act on the feedback.

6. PURCHASE OF EQUIPMENT AND SET UP OF ROOMS

Each PC Institution were required to purchase equipment necessary according to the EC rules and regulations. A minimum specification was provided by the partners at MU, this is listed in appendix 7.21 tender process was required. Each PC institution describes below how they purchased the equipment and set up their rooms. Example of a room plan can be found in the appendix 7.22 which was provided to all PCUs.

6.1. KSMU

6.1.1. Purchase of equipment

Karaganda State Medical University arranged equipment purchase according to budget proposal and Guideline for the Use of the Grant, v2. KSMU received Certificate of VAT exemption from EACEA. Activities and measures on VAT exemption with local TAX Department were launched sufficiently in advance. Letter about VAT status was received from regional tax department on 15 February 2016. Technical specification for equipment was provided to all institutions by Masaryk University (ANNEX 7.4) and presented at on-line

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meeting for consideration by all partners. Total amount devoted for equipment purchase for KSMU is 44 630 euro. According to Guideline for the Use of the Grant, KSMU announced call for tender on April 2016. After successful procedure KSMU received full list of equipment to the end of August 2016. Equipment was installed at appropriate rooms and devoted for the purpose of TAME project implementation.

	Item	Quantity
1.	PC computers, keyboard, mouses, software	2
2.	Printer, fax and scanner all in one	1
3.	Cartridges for printer	2 kit
4.	Smart Boards	3
5.	Video conferencing system	4 set
6.	Laptop	1
8.	Android tablets	10 PC.

6.1.2. Set up of rooms

KSMU provided four (4) rooms for project implementation purposes. Rooms were equipped according to room plan provided to all partners. The idea of room is to change the traditional room arrangement for student – centred learning environment. Circle table for sitting around students together with facilitator. PC connected to internet and smart board for visualisation Virtual Patients through OpenLabyrinth programme. Additional equipment for room tables, chairs provided from KSMU's own resources.

6.2. AMU

6.2.1. Purchase of equipment

JSC "AMU" was allocated 44630 euro for the equipment in accordance with the project plan. In May 2016, a tender was announced. The tender was successful and in June equipment was purchased. Below is the list of the equipment that should be bought for the project implementation.

№	Name	Psc	Sum
1	PC computers, keyboard, mouse, software	2	2400
2	MFD	1	900
3	Cartridge	1	800
4	Interactive board	3	32950
5	Video conferencing system	1	140
6	Laptop	1	1200

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7	Cables and switches for 3 rooms		1200
8	Tablet	1	5040
	In total		**44630**

6.2.2. Set up of rooms

The TAME team from AMU identified three classrooms for the sessions and one room for tutors. The rooms are located in the main building of AMU on the 7th floor in Beibitshilik str. 49a. All four rooms are furnished according to the project requirements at the expense of the university funds.

6.3. ZSMU

6.3.1. Purchase of equipment

Zaporozhye State Medical University arranged equipment purchase according to the budget proposal and Guideline for the Use of the Grant, v2. ZSMU received Certificate of VAT exemption from EACEA, and according to the current legislation of Ukraine, namely Letter from State Fiscal Service dated 16.01.2016 № 765/6/99-99-19-03-02-15, Section: Advice for legal entities), ZSMU can purchase equipment in the frames of the Project without VAT.

Technical specification for equipment was provided to all institutions by Masaryk University.

Total amount devoted for equipment purchase for ZSMU is 43 950 euro. ZSMU announced call for tender in January 2017. Because of different codes of the equipment required several different tender procedures were announced. Some of them required announcing for the second time because of lack of needed documents from the Participants' side or lack of participants for a tender procedure to be completed. After all procedures, ZSMU received full list of equipment to the middle of July 2017. The equipment was taken to the balance of the University, inventory numbers were given to each item.

6.3.2. Set up of rooms

The Administration of ZSMU has allocated four (4) rooms for project implementation purposes (3 for tutorials, and 1 for trainings and group meetings). Rooms are in the stage of repair and furnishing.

Repair and furniture (tables, chairs) are provided from ZSMU's own resources. All repairs are planned to be over until the beginning of tutorials in the frames of the project (the second year).

6.4. BSMU

6.4.1. Purchase of equipment

The tender on purchasing of equipment was on December, 12, 2016.

Equipment has been purchased according to the project plan:

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Title	Serial number	quantity
PC Prologic	90512373, 90514289, 90554193	3
Printer, fax and scanner HP Color	VNB8J78M3F	1
Smart Boards	TTB1601880000, TTB1601880004, TTB1532880062	3
Video conferencing system (web-cams, headphones) Logitech	1617LZOFGOA9	1
Laptop Asus	G8NOGROOK166329	1
Monitor LG	610NTMX6N507, 610NTKF6N533, 610NTEP6N508	3
Tablet Samsung	R52HA00V03M, R52H611TYSX, R52H611TYKZ, R52H51BL08H, R52H51BKZVX, R52HA0213EL, R52HA0214WW, R52HA00V0EE, R52H90EMZTB, R52H51AFYGV	10

6.4.2. Set up of rooms

Three rooms were prepared to deliver sessions. The rooms have been renovated and equipped with round tables, chairs, whiteboards, computers and projectors.

6.5. HMU

6.5.1. Purchase of equipment

The tender on purchasing of equipment was on 22nd February 2017. Total amount devoted for equipment purchase for HMU is 44.020 euro. After successful procedure, HMU received full list of equipment to the end of July 2017. Equipment was installed in appropriate rooms and devoted for the purpose of TAME project implementation.

No	Items	Unit
1	PC Computers, keyboards, mouses, software	3
2	Printer, fax và scan (3 in 1)	1
3	Cartridges for printer	-
4	Smart Boards	3
5	Webcam and headphones	1
6	Laptop	1
7	Cabling and switch	-
8	Tablet	10

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6.5.2. Set up of rooms

HMU provided 3 rooms for project implementation purpose. The rooms are located in the main building of Institute for Preventive medicine and Public Health, Hanoi Medical University. Rooms were equipped according to room plan provided by KSMU. The room is difference with the traditional room arrangement for student-centred learning environment. Student sitting around together with facilitator. PC connected to internet and smart board for visualisation Virtual Patients through OpenLabyrinth programme.

6.6. HUMP

6.6.1. Purchase of equipment

Hue UMP had finished the purchasing 10 kinds of equipment, 2 kinds of equipment are bidding, and cancelled 1 item. The equipment' purchase is expected to be finished at the end of September 2017.

Equipment status according to the project:

No	Items	Quantity	Status
1	Smartboard	3	purchased
2	PC (CPU, monitor, keyboard, mouses, software)	3	purchased
3	Laptop Asus	1	purchased
4	Printer, fax and scanner all in one	1	bidding
5	Webcam Logitech	1	purchased
6	Headphones	1	purchased
7	Tablet Samsung Galaxy Tab A 10.1	10	bidding
8	Cabling	3	purchased
9	Switch Sisco	3	purchased
10	Server for OpenLabyrinth	1	cancelled

6.6.2. Set up of rooms

There are 3 pre-clinical rooms have been set up in terms of infrastructure and equipment, ready for use of training new cases.

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7. APPENDIX

7.1. Prelimenary training for BSMU participants in ZSMU MEC, Ukraine

AGENDA

4 -5 February 2016

Venue	Medical Education Center of Zaporozhye State Medical University
Moderator	PBL-trainer – Cherkovska Olga
Participants	Garas Mykola Tarnavska Svitlana Bilous Tetiana Bilyk Galyna Shahova Olga Sazhyn Serhii

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Thursday, 4th February 2016		
10:00	**11:00**	Welcome. Problem-based learning, principles and approaches. Role of tutors and students
11:00	**11:30**	Discussion and questions
11:30	**11:45**	Coffee Break
11:45	**13:00**	PBL session with tutors in the role of students
13:00	**14:00**	PBL session with students
14:00	**15:00**	Lunch Break
15:00	**16:45**	PBL session with students
16:45	**17:00**	Discussion of results. Q&A

Friday, 5th February 2016		
09:30	**09:45**	Case overview
09:45	**11:15**	PBL session with students
11:15	**11:30**	Coffee Break
11:30	**13:00**	Continuing PBL session with students
13:00	**14:00**	Lunch Break
14:00	**15:00**	Discussion of difficult issues and results
15:00	**16:00**	Master class summary

7.2. Criteria for choosing participants

The following part might be changed depending on where is better to put it

Background:

50 % of the current project participants (3 PCUs out of 6 ones) were given some training in PBL case facilitating in the previouse ePBLnet project. Having this expirience and analysing retrospectivly previouse results, TAME training was arranged (or will be) on the basis of taking into the consideration the following issues:

- The process of selecting the candidates for traing should not be random but should be based on the thoughtful strategic approach in order to minimise possibility to work with weak or unacceptable participants;
- The desirable criteria were suggested for PCUs for selecting candidates for training: knowledge of PBL principles; expirience in clinical teaching; the basic or above level of english language; the oportunity to go throught multistages training to be prepared for the facilitating clinical error cases

n	First name, surname	Speciality	PBL knowledge/experience: - Worked as PBL tutor in linear - Worked as PBL tutor in interactive cases; - Was trained as PBL tutor	English : - Some knowledge = less than beginner; - Beginner; - Intermediate
	PPARTICIPANTS :			
	Example			
1.	Elena Dogma	Paediatrician	Worked as PBl tutor with branched cases	Intermidiate
2	Marina Maleeva	Infect. disease	Was trained in PBL	Beginner
	OBESRVERS :			
1	Rasvan Dorgeev	Paed.	Worked with linear PBL cases	Less than beginner

7.3. ONLINE TAME interactive training agenda

09.00	Introductions	EI
09.10	Purpose of workshop	EI
09.45	Facilitating skills in interactive (branched) cases	EI
10.00	Discussion and clarification	EI

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10.30	Q&A; Closing	

7.4. Online Error case training agenda

0930	Introductions	EI
0940	Purpose of workshop	EI
0945	Error in Medicine – why is this important (Talk)	JR
1005	Discussion and clarification	EI/JR
1010	TAME – the project purpose and processes (Talk)	EI
1025	Discussion	EI
1030	Tutoring with decisions and options; facilitation skills Using Error cases – what's different; using clinical and error LOBs; developing clinical knowledge AND personal insight (Tutorial with case)	EI JR
1115	Dealing with the difficult – discussing incorrect thinking; metacognition (Discussion)	EI/JR
1130	Close	

7.5. The Materials for the preparation for the online Error cases tarining

All participants to view the first case that will be used for the teaching (Dominic Barton). Th linkes are given

https://openlabyrinth.sgul.ac.uk/renderLabyrinth/index/284

Case commentary

https://openlabyrinth.sgul.ac.uk/renderLabyrinth/index/295

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7.6. Intermediate assignments for tutors while in transition between online and F2F training

A) Knowing PBL, what do you think for you personally are :

1) the easiest parts in facilitating interactive PBL cases
2) the difficult parts for tutors in facilitating interactive PBL cases

B) Having knowledge about main PBL principals how you personally might be benefit in preparation for your future work as a clinical PBL tutor besides on-line and F2F training?

1) Have a chance/ possibility to discuss the training information with the TAME training participants
2) Have a chance/ possibility to discuss the training information with the another colleagues
3) Have a chance/ possibility to discuss the training information with a Dean/ leaders of the departments/ TAME project leaders

C) What kind of challenges can you predict while facilitating PBL clinical cases:

1) Acquisition of personal experience in facilitating
2) Students participation / contribution in the discussion may be not in the way as I expected
3) The clinical cases might be needed extra changes/ additions/ adaptations
4) Others: please suggest/ provide the answers

D) Talking about the students, what, in your opinion, would be

1) Most interesting part of the PBL clinical case
2) Most productive/ useful part of the PBL clinical case
3) Most difficult part of the PBL clinical case

7.7. Face- to – face TAME Training Agenda for Kazakhstan and Ukraine

Facilitating skills in interactive clinical D-PBL cases

PROGRAMME DAY 1

09:15	Registration, Tea/coffee	
09:30	Facilitating skills in D-PBL cases: main principles	
10:00	Q&A; Assignments for the teams; Discussion	

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11:00	Tea /Coffee	
11:15	Working with the students: branched PBL case	
12:45	Lunch	
14:00	Discussion- reflection; team work	
15:00	Working with the students: clinical D-PBL case	
16:30	Tea /Coffee	
16:45 **17:00**	Conclude	

PROGRAMME DAY 2

09:15	Registration, Tea/coffee	
09:30	Reflection on day 1: assignments for the team	
10:15	Discussion; Q&A	
11:00	Tea /Coffee	
11:15	Students report back / feedback	
12:45	Wrapping up the case & students debrief	
13:15	Lunch	
14:30	Discussion; team work	
15:30	Debrief with delegates	
15:45	Tea /Coffee	

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16:00	Individual delegate feedback and course evaluation	

4.8 Face - to - face TAME Training Agenda for HMU &HUMP

7.8. Training Against Medical Errors

Facilitating skills in interactive clinical D-PBL cases

26-27 MAY 2016, Hanoi, Vietnam

Dr. Ella Iskrenko

PROGRAMME DAY 1

09:15	Registration, Tea/coffee	
09:30	Talk: Facilitating skills in D-PBL cases: main principles	
10:00	Q&A	
10:10	Branched PBL: Tutors as students	
11:10	Q&A; Discussion	
11:30	Tea / Coffee	
11:45	Tutors with the students: branched PBL case	
13:00	Lunch	
14:00	Discussion- reflection; team work	
15:00	Working with the students: clinical D-PBL case	

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16:30	Tea / Coffee	
16:45 - 17:00	Recapping	

TAME

Training Against Medical Errors

Facilitating skills in interactive clinical D-PBL cases

Dr. Ella Iskrenko

PROGRAMME DAY 2

09:15	Registration, Tea/coffee	
09:30	Reflection on day 1: assignments for the team	
10:15	Discussion; Q&A	
11:00	Tea /Coffee	
11:15	Students report back / feedback	
12:45	Wrapping up the case & students debrief	
13:15	Lunch	
14:30	Discussion; team work	
15:30	Debrief with delegates	
15:45	Tea /Coffee	

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16:00	Individual delegate feedback and course evaluation	

7.9. Agenda for writing new cases and using OL software

TAME

Training against medical error

Partners:

1. Karaganda State medical University
2. St George's, University of London
3. Karolinska Institute
4. Masaryk University
5. Aristotle University of Thessaloniki
6. Zaporozhye State Medical University
7. Bukovinian State Medical University
8. JSC Astana Medical University
9. Hanoi Medical University,
10. Hue University of Medicine and Pharmacy

AGENDA

TAME Case writing training

London, United Kingdom, 5-6th December 2016

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Venue:	St George's University of London
Attendees:	Case writers/adaptors
Contact details:	Trupti Jivram tjivram@sgul.ac.uk Terry Poulton tpoulton@sgul.ac.uk Ella Iskrenko eiskrenk@sgul.ac.uk

Monday 5th December 2016				**Room**
09:00	09.10	**Registration and Welcome**	SGUL	H2.6
09.10	09.30	**Introductions**	All partners	H2.6
09.30	09.45	**Open Labyrinth**	Sheetal Kavia	H2.6
09.45	10.30	**Creating Error Virtual Patients (VPs)**	Jonathan Round	H2.6
10.30	10.50	Coffee Break		H2.6
11:00	12.30	**Continue, Creating Error (VPs)**	Jonathan Round	H5.1

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12.00	13.00	Lunch Break		
13.00	13.30	**VPs tips and tricks**	Terry Poulton	H5.4
13.30	14.30	**Creating Error VPs**	All Partners	H5.1
14.30	15.00	Coffee Break		H5.4
15.00	15.30	**Error case walk through**	Jonathan Round	H5.1
15.30	16.30	**Creating VPs**	All partners	H5.1
16.30	17.00	**Feedback from Day 1**	All partners	H5.1
18.00		**Dinner**		

Tuesday 6th December 2016				**Room**
09.00	10.00	**Recap of Day 1**	Terry Poulton	H5.5
10.00	10.30	Coffee Break		H5.5
11:00	12:30	**Continuation of creating Error VPs**	All partners	H5.1
12.30	13.30	**Feedback** **Q&A** **Next steps**	All partners	H5.1

7.10. KSMU training agenda

Training for tutors of KSMU

16, 17 September 2016

Place	KSMU
Trainer	Dobler Kristina

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Participants	Kisabekova Akbota Isaeva Aiman Alshinbekova Gulsharbat Sersauletova Aizhan Amangeldieva Karakoz Kalbekov Zhandarbek

Friday, 16th September 2016		
10:00	11:00	Welcome. Lecture "The basic principles of d-PBL- tutorials" for tutors – Kristina Dobler. TAME – the project purpose and processes. Error in Medicine – why is this important.
11:00	11:45	Discussion and questions session
11:45	12:00	Coffee break
12:00	13:30	d-PBL-tutorial on a case of Ramadan Galymzhan for the students of the 6 course (year) conducted by tutors. The coordination of the training K.Dobler.
13:30	14:00	Team work. Questions and discussion.

Saturday, 17th September 2016		
10:00	11:30	Continuation of training on clinical cases with students. Sessions conducted by tutors under the coordination of the trainer
11:30	12:15	Team work. Questions and discussion.
12:15	12:30	Student's feedback. Coffee break for tutors.
12:30	12:50	Using Error cases – what's different. Discussion with tutors.
12:50	13:20	Feedback to tutors and separate feedback to each trained tutor.

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Training for tutors of KSMU

12, 13 October 2016

Place	KSMU
Trainer	Dobler Kristina
Participants	Ahaeva Ardak Kisabekova Akbota Sadvakasova Saida Isaeva Aiman Dusembina Ainash Alshinbekova Gulsharbat Sersauletova Aizhan Ibisheva Ainash Amangeldieva Karakoz Serikova Maya Kalbekov Zhandarbek

Wednesday, 12th October 2016		
09:30	10:00	Welcome
10:00	11:30	Conducting independent d-PBL sessions by KSMU tutors (12 people) on the 6 pediatric cases (2 tutor per 1 case) to students of 6 year.
11:30	12:00	Coffee break
12:00	12:30	Team work. Questions and discussion.

Thursday, 13th October 2016		
10:00	11:30	Continuation of sessions on the 6 pediatric cases by KSMU tutors.
11:30	12:00	Team work. Discussion and questions on each case.

7.11. KSMU case writing training agenda

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Agenda

TAME Case writing training

Karaganda, KSMU, 5-6th January 2017

Place	KSMU
Trainer	Dobler Kristina
Participants	Ahaeva Ardak Kisabekova Akbota Sadvakasova Saida Isaeva Aiman Dusembina Ainash Alshinbekova Gulsharbat Sersauletova Aizhan Ibisheva Ainash Amangeldieva Karakoz Serikova Maya Kalbekov Zhandarbek Riklefs Victor Kalieva Sholpan

Thursday, 5th January 2017		
09:00	09:10	Welcome (Kalieva Sholpan)
09:30	09:45	Open Labyrinth (Victor Riklefs, Dobler Kristina)
09:45	10:30	Presentation -Creating Error Virtual Patients (VPs) (Dobler Kristina)
10:30	10:50	Coffee Break
12:00	12:30	Presentation-VPs tips and tricks (Dobler Kristina)
12:30	13:00	Feedback from Day 1

Friday, 6th January 2017		
09:00	09:30	Review of Day 1(Dobler Kristina)
09:30	11:00	Writing Error VPs (All participants) in the Openlab

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11:00	11:30	Coffee Break
11:30	13:00	Continuation of Writing Error VPs(All participants) in the Openlab
13:00	13:30	Feedback (All participants)

7.12. ZSMU training agenda

Erasmus+

TAME – training against medical error

AGENDA

training for tutors of Zaporozhye

State Medical University

4 -7 July 2016

Venue	Medical Education Center of Zaporozhye State Medical University
Trainer	Furyk Olena

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Participants	Skripnikova Ianina Patsera Marina Velikanova Tetiana Grebeniuk Larisa Levchuk Tetiana Gladun Katerina

Monday, 4th July 2016		
09:00	**09:30**	Welcome. Problem-based learning, principles and approaches. Role of tutors and students
09:30	**10:00**	Discussion and questions time

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10:00	**11:00**	PBL session with tutors in the role of students with the use of 'Ivanov family' case
11:00	**11:15**	Coffee break
11:15	**13:00**	PBL session with students with the use of 'Ivanov family' case
13:00	**13:30**	Coffee Break
13:30	**14:00**	Discussion of results. Q&A

Tuesday, 5th July 2016		
09:00	**09:15**	Case overview
09:15	**10:45**	PBL session with students with the use of 'Ivanov family' case
10:45	**11:00**	Coffee Break
11:00	**12:30**	Continuing PBL session with students
12:30	**13:00**	Discussion of results. Q&A

Wednesday, 6th July 2016		
09:00	**09:15**	Case overview
09:15	**09:45**	PBL session (final part) with students with the use of 'Ivanov family' case
09:45	**10:15**	Discussion of difficult issues and results of the introduction classes with the use of the linear case "Ivanov family"
10:15	**10:30**	Coffee Break
10:30	**10:45**	Introduction. TAME – training against medical error
10:45	**11:15**	Discussion and questions
11:15	**12:45**	Session with students with the use of clinical case Rory Gallagher

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12:45	**13:00**	Coffee Break
13:00	**14:30**	Continuing session with students with the use of clinical case Rory Gallagher
14:30	**15:00**	Discussion of results. Q&A

Thursday 7th , July 2016		
09:00	**09:15**	Case overview
09:15	**11:15**	Session (final part) with students with the use of clinical case Rory Gallagher
11:15	**11:30**	Coffee break
11:30	**12:30**	Discussion of difficult issues and results of the introduction classes with the use of clinical case Rory Gallagher
12:30	**14:00**	Discussion of results. Training summary

7.13. ZSMU results

Students' and tutors' survey after the training

Students were offered to discuss the following questions:

1. What positive and interesting features they noticed in the new methodology? What negative and difficult features they noticed in the PBL?
2. Personal opinion on PBL.

After the survey the following conclusions were made:

1. **What positive and interesting features they noticed in PBL?**

- Team work is an interesting feature in the new methodology
- Inviting and relaxed atmosphere
- Enough time for work
- Simultaneous revision of various disciplines
- Better comprehension of the material
- Systematization of the knowledge
- Responsibility for the actions

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- Detailed study of the clinical case
- Development of clinical thinking
- Clinical cases conditions are close to the real life situations
- One has to act fast in emergency situations

2. **What negative and difficult features they noticed in the PBL?**

- One cannot use learning material during the session (books, tablets, internet)
- It is hard to work in a team and hear one another
- It is hard to remember some disciplines (e.g. pharmacology)
- Lack of help from the teacher and immediate error correction

3. **Personal opinion on PBL**

- The PBL is more interesting compared to the traditional education system
- Students are more involved working in a team
- There is an interest and motivation determined by the possibility of avoiding medical errors
- There is a motivation in preparing a homework
- An opportunity to participate in the discussion
- Sessions are logical and effective, they facilitate clinical thinking
- All training participants want to participate in such project

Tutors were offered to discuss the following questions:

1. What interesting features they noticed in the PBL?
2. What difficult features they noticed in PBL?
3. What difficulties do teachers see in the role of the tutor?
4. Personal opinion on PBL.

Conclusion:

1. **What interesting features they noticed in the PBL?**

- Paediatric focus of cases
- Small group of students
- Work with senior students
- Relaxed atmosphere
- Fast adaptation in a new team
- An opportunity to see the right course of events
- Expectance of students' decision making
- An opportunity to put yourself in student's place and not to take errors critically

2. **What difficult features they noticed in the PBL?**

- Unable to help students during the session

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- To correctly articulate the questions but not clearly help them
- To organize the team work but not interfere at the same time
- To organize the work inside the team but not with the tutor
- To direct students toward self-guided work
-

3. **What difficulties do teachers see in the role of the tutor?**

- Forgoing the active discussion
- Not helping the students
- To interfere and guide students in the right moment

4. **Personal opinion on PBL**

- Invaluable and interesting experience
- Needs careful translation and adaptation of the cases
- Desire to continue the work in the project
- A great opportunity to do “the old work” using a “new approach”
- An opportunity to point out the errors and make comments in the end of the case
- This methodology is more effective than the traditional one
- It is a good practice in forming a clinical algorithm of diagnosing
- Such methodology may be implemented not only in the students’ training but also in the post-graduate education

7.14. ZSMU training agenda 29.11.16

TAME- Training Against Medical Errors

AGENDA

Training on new cases writing

Of Zaporozhye State medical University in the frames of the project

29 February 2016

Venue	Medical Education Center of Zaporozhye State Medical University

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Trainer	Olena Furyk
Participants	Oleksandr Kostrovskyi Andrii Bilyi Oleksandr Voloshyn Andrii Bilai Alona Pavlenko Olena Filatova

29 February 2016		
14:00	**14:30**	Welcoming words. D-PBL, main principles of teaching. Role of tutors and students
14:30	**15:00**	Q&A
15:00	**15:30**	Discussion of objectives of the meeting in London Conduction ofPBL tutorial on the basis of a case" The Ivanovs Family" (tutors as students)
15:50	**15:45**	Tea/coffee
15:45	**17:00**	Discussion of themes for new cases on surgery, Creation of outcomes for new cases, Formation of working group on new cases development Q&A

7.15. ZSMU December 2016 training agendas

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TAME- Training Against Medical Errors

AGENDA

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Training on new cases writing

Of Zaporozhye State medical University in the frames of the project

08 December 2016

Venue	Medical Education Center of Zaporozhye State Medical University
Participants	OlenaFuryk Oleksandr Kostrovskyi Andrii Bilyi Oleksandr Voloshyn Andrii Bilai Oleksii Kapshytar

08 December 2016		
14:00	**15:00**	Welcoming words. A lecture for new members of the working group (surgeons) about TAME project, medical errors, and Virtual Patients (Furyk O.)
15:00	**15:30**	Sharing experience following the meeting in London (Kostrovskyi O.)/ Discussion of most frequent medical errors.
15:30	**16:00**	Sharing experience following the meeting in London: methodical and technical aspects of creation of new cases in OpenLabyrinth
16:00	**17:00**	Q&A

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TAME- Training Against Medical Errors

AGENDA

Training on new cases writing

Of Zaporozhye State medical University in the frames of the project

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20 December 2016

Venue	Medical Education Center of Zaporozhye State Medical University
Participants	Olena Furyk Oleksandr Kostrovskyi Andrii Bilyi Oleksandr Voloshyn Andrii Bilai Oleksii Kapshytar Alona Pavlenko Anton Kuznetsov

20 December 2016		
12:30	**15:30**	New members of the working group (surgeons) attended a tutorial on the basis of a case "Dasha Klimchuk", Part 1, for better understanding the structure of a branch case and the essence of medical errors (Anton Kuznetsov as a tutor).
15:30	**16:00**	Q&A

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TAME- Training Against Medical Errors

AGENDA

Training on new cases writing

Of Zaporozhye State medical University in the frames of the project

22 December 2016

Venue	Medical Education Center of Zaporozhye State Medical University

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Participants	Olena Furyk Oleksandr Kostrovskyi Andrii Bilyi Oleksandr Voloshyn Andrii Bilai Oleksii Kapshytar Alona Pavlenko Anton Kuznetsov

22 December 2016		
12:30	**15:30**	New members of the working group (surgeons) attended a tutorial on the basis of a case "Dasha Klimchuk", Part 1, for better understanding the structure of a branch case, the essence of medical errors, and objectives of the project (Anton Kuznetsov as a tutor).
15:30	**15:45**	Tea/coffee
15:45	**16:45**	Election of the responsible person of new case writing process (Oleksandr Kostrovskyi) Distribution of cases themes among the surgeons responsible for new case writing. Review and correcting outcomes for each new case. Discussion and determination of medical errors to each surgical case.
15:45	**17:00**	Q&A

D.1.3. Training Plan, D3.1 Training plan, writing new cases, staff trained

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7.16. BSMU training agenda

TAME – training against medical error

AGENDA

training for tutors of Bukovinian State Medical University

7, 9 September 2016

Place	Department of paediatrics and children's infectious diseases of Bukovinian State Medical University
Trainer	Bilyk Galyna
Participants	Bilous Tetiana Garas Mykola Sazhin Sergii Shakchova Olga Tarnavska Svitlana Vlasova Olena Khilchevska Victoria Marusyk Uliana Bogutska Natalia

Wednesday, 7th September 2016		
11:00	**11:30**	Welcome. Problem-based learning, principles and approaches. Role of tutors and students (lecture, Galyna Bilyk).
11:30	**11:45**	Discussion and questions.

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11:45	**13:15**	PBL session with students using linear case with tutors who attended the face-2-face trainings in Zaporizhia (4 participants).
13:15	**13:30**	Coffee break
13:30	**15:00**	PBL session with students using linear case with beginner tutors.
15:30	**16:30**	Team work. Questions and discussion.

Friday, 9th September 2016		
11:00	**11:45**	TAME – the project purpose and processes. Error in Medicine – why is this important. (lecture, Galyna Bilyk)
11:45	**12:00**	Discussion and clarification.
12:00	**13:30**	Working with the students: clinical D-PBL case.
13:30	**13:45**	Coffee break
13:45	**14:00**	Using Error cases – what's different. Discussion with tutors.
14:00	**15:30**	Working with the students: clinical D-PBL case.
15:30	**15:45**	Student's feedback. Coffee break for tutors.
15:45	**16:15**	Team work, discussion.
16:15	**17:00**	Individual delegate feedback and course evaluation.

7.17. List of Participants. HMU

STT	Name	Email	Phone number
1.	MSc. Le Thị Lan Anh	bslananhle@gmail.com	

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2.	MSc. Le Thị Thuy Dung	letono2002@gmail.com	0987008914
3.	MSc. Nguyen Thị Ha	bsnguyenha2010@gmail.com	
4.	MD. Vu Thương Huyen	thuonghuyen2290@gmail.com	0973795706
5.	MSc. Do Thanh Huong	DrDoThanhHuong@yahoo.com	0913383516
6.	PhD. Ngo Thị Thu Huong	thuhuong0380@yahoo.com	0983270080
7.	MSc. Nguyen Thị Thuy Hong	hongbmnhihn@yahoo.com.vn	0988903673
8.	MSc. Dao Thuy Quynh	thuyquynh311@gmail.com	0974625826
9.	MSc. Do Cam Thanh	camthanh25@gmail.com	
10.	MSc. Hoang Kim Lam	Docteur_kim1306@yahoo.com	0982255567
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12.	MD. Dinh Thị Ngọc Mai	dinhngocmai1988@gmail.com	0902292590
13.	MSc. Pham Thu Nga	dr.phamnga@gmail.com	0976922217
14.	MSc. Do Thi Minh Phuong	phuong_kitten2002@yahoo.com	
15.	MSc. Luong Thi Phuong	luongphuong2233@gmail.com	0972694603
16.	MSc. Truong Van Quy	truongquynhp@gmail.com	
17.	MD. LeTrong Tu	dr.letrongtu@gmail.com	0972694603
18.	MSc. Nguyen Thu Van	vantn86@gmail.com	

7.18. Training for HMU trainers on scenarios-based learning: AGENDA

1. Time and location

- Time: 13:30 pm – 16:30pm October 19th and 26th, 2016
- Place: Room 501 Block A7 - Institute for Preventive Medicine & Public Health

2. Content

Time	Activity	Presenter
Day 1: 19th October, 2016		
13:20 – 13:30	Registation	

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Time	Activity	Presenter
13:30 – 13:40	TAME introduction	Assoc. Prof. Le Thi Huong
13:40 – 14:00	PBL introduction	MSc. Dr. Le Thuy Dung
14:00 – 15:00	Case study Rory	MSc. Dr. Le Thuy Dung
15:00 – 15:15	Tea break	
15:15 – 15:45	Case study Rory and discussion	MSc. Dr. Le Thuy Dung
15:45 – 16:30	OpenLabyrinth system introduction	Assoc. Prof. Tran Xuan Bach
Day 2: 26th October, 2016		
13:20 – 13:30	Registation	
13:30 – 15:00	Case study Rory	Lecturer of Pediatric Department
15:00 – 15:20	Tea break	
15:20 – 16:30	Case study Rory and discussion	Lecturer of Pediatric Department

7.19. TAME internal workshops – HMU

1. Time and location

- Time: 14pm, 28th December 2016

- Location: Institute of Preventive Medicine and Public Health, HMU

2. Content

Time	Content	Presenter
14:00-14:30	Meeting greeting	Prof. Le Thi Huong
14:30-15:30	Share how to work on Openlabyrinth: -Perform directly on the computer -Tutors practice after that	Dr. Le Thi Thuy Dung
15:30-16:00	Share experience of LOBs teaching method + 5 tutors in infectious department played student role. + Discuss based on 5th pediatric case.	Dr. Le Thi Thuy Dung
16:00	Discussion	

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3. Result

Introduction of Problem-based learning (PBL)

Problem-based learning (PBL) is a new method focusing on students. Using virtual clinical cases to identify medical errors, students are put into “real” situations. In this way, students can recognize the right and the wrong choice, why they are false and what may happen if they make the incorrect decision.

Without giving advice and suggestions, students are free to make wrong decisions so that they can learn from lesions and assess their insufficient knowledge, thereby generating their learning objectives.

PBL method gives students more opportunities to interact, enhance clinical reasoning and decision making based on virtual situations.

Case study and PBL application

Practice with a virtual case of Rory Gallagher. Lecturers play the role of students, and lecturers had chance to understand the structure of the case study. After that, lecturers practiced on the target group – sixth year Preventive Medicine students to discuss on the case study of Rory Gallagher and learn the difficulties and necessary modifications to apply PBL to Vietnamese students.

Each lecturer tried to guide students about the case study Rory in 15-20 minutes. Six students discussed about the main body, and they were requested to explain about the choices and diagnosis that they supposed. With each information provided, students had chances to look back their afore-mentioned diagnosis and think about further possibilities. In this technique, all students involved in the discussion. At the end of the training, students had chances to look back all process, summarize all information in LOBs, and required to review the knowledge later on.

Students had difficulties in making decisions as they were familiar to the traditional learning method which emphasizes on making the right choice and not used to analyzing the situation with virtual patients. However, thanks to PBL, students can now identify their knowledge gaps by listing the learning objectives (LOBs). PBL's received very positive feedback from students and the faculty. PBL would probably fit the students at Hanoi Medical University and may be able to integrate into the curriculum.

4. Challenge

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- Collect tutors for training
- Not approach of PBL
- Closed-minded
- Tips for students training: how to solve when students quiet, too talkative, when to make a pause for discussion
- All tutors concern about level of students => try to help students with some clue
- Prolonged time of class
- Create the LOBs
- Understand of whole case
- Always choose the right option

7.20. HMUP training agenda

Monday, 17th October 2016		
08:00	**08:30**	Welcome
08:30	**09:00**	Introduction of virtual patients (VPs)
09:00	**09:30**	Introduction of TAME project and some skills needed in PBL teaching
09:30	**09:45**	Coffee Break
09:45	**11:00**	PBL session with tutors in the role of students
11:00	**11:30**	Discussion and questions
11:30	**14:00**	Lunch Break
14:00	**15:30**	PBL session with students
15:30	**15:45**	Continuing PBL session with students
14:45	**16:00**	Coffee Break
16:00	**17:00**	Discussion and feedback from tutors

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17:00		End of day 1

Tuesday, 18th October 2016		
08:00	**09:00**	Feedback of Day 1: task for tutors
09:00	**09:30**	Questions and Discussion
09:30	**09:45**	Coffee Break
09:45	**11:00**	Feedback from students
11:00	**11:30**	Summary and conclusion of the case
11:30	**14:00**	Lunch Break
14:00	**15:30**	Discussion on feedback from tutors and students
15:30	**16:00**	Coffee break
16:00	**17:00**	Individual discussion with tutor about PBL
17:00	**17:30**	Closing the workshop

7.21. Minimum specification of equipment

TAME project – Minimum HW Equipment Specification

Masaryk University, January 2016, VER 1.0, 2016-01-05

PC (1000 Euro)

Processor: Passmark min. 7500, max. TDP 65 W, min. 4 cores

RAM: min. 16GB DDR4 in dual-channel

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GPU: min. 1 GB GDDR3, PCIe x16, D-SUB, DVI, passive

Case: Mini ATX or smaller

PSU: min, 500 W, ATX, min. efficiency >=82 %, silent 120mm fan

HDD: min. 2 TB, min. 7200 rpm, SATA III

DVD-RW

Keyboard: interface USB

Mouse: optical, USB, min. 800 DPI, 3 buttons

Monitor: min. 22",ratio 16:10, IPS (AH IPS), 1680x1050, D-SUB, DVI, integrated speakers, height adjustment

OS: Windows 10 Pro 64 bit.

PC (1200 Euro)

Processor: Passmark min. 7500, max. TDP 65 W, min. 4 cores

RAM: min. 16GB DDR4 in dual-channel

GPU: min. 1 GB GDDR3, PCIe x16, D-SUB, DVI, passive

Case: Mini ATX or smaller

PSU: min, 500 W, ATX, min. efficiency >=82 %, silent 120mm fan

SSD: min. 480 GB, SATA III, MLC min. 20nm, trim and SMART support

HDD: min. 2 TB, min. 7200 rpm, SATA III

DVD-RW

Keyboard: interface USB

Mouse: optical, USB, min. 800 DPI, 3 buttons

Monitor: min. 22",ratio 16:10, IPS (AH IPS), 1680x1050, D-SUB, DVI, integrated speakers, height adjustment

OS: Windows 10 Pro 64 bit.

Printer, fax and scanner all in one:

Functions: Color printing, copying, scanning, fax

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Print technology: Laser, duplex with ADF

Interfaces: USB, LAN (RJ45)

Print speed: min. 30 ppm

Duty cycle: Minimum 75,000 pages monthly

Print quality (black and color) min. 600x600dpi

Scanner type: Flatbed, ADF

Scanner ADF capacity min. 50 pages

Memory: min. 256 MB

Paper input tray: min. 250-sheets, 50 sheets ADF

Paper output tray: min. 250-sheets

Capabilities: Scan-to-E-mail

Smart Board

Interactive flat panel (no projector needed), LED backlight

Size min. 70”

Touch sensitive win multitouch

Resolution: min. 1920x1080

Aspect ratio 16:9

Interfaces: D-Sub, USB, SPDIF, RCA Analog Audio & Composite Video

Builtin speakers

Webcam and headphones

Resolution: min. FullHD (1920x1080)

Speed: min. 30 pps

Autofocus, digital zoom

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Integrated microphone

Interface: USB

Mount options: Table, monitor clip, notebook

Headphones:

3,5mm jack, 32 Ohm, freq. 18-20000

Laptop (1000 Euro)

Processor: min. 4000 Passmark, TDP max. 15W

RAM: min. 8 GB

Display: min. 13,3”, anti-glare, FullHD

SSD: min. 240 GB

Weight: max. 1,3 kg

Interfaces: docking connector, min. 3x USB 3.0, HDMI, GLAN, WiFi a/ac/b/g/n

OS: Win 7 Pro or Win 8.1 Pro or Win 10 Pro

Laptop (1200 Euro)

Processor: min. 4000 Passmark, TDP max. 15W

RAM: min. 8 GB

Display: min. 13,3”, anti-glare, FullHD

SSD: min. 500 GB

Weight: max. 1,3 kg

Interfaces: docking connector, min. 3x USB 3.0, HDMI, GLAN, WiFi a/ac/b/g/n

OS: Win 7 Pro or Win 8.1 Pro or Win 10 Pro

Tablet (420 Euro)

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OS: Android 5.0 or newer

CPU: min. 8-core, AnTuTu v.5 min. 36000

RAM: min. 3 GB

Display min. 9,7”, 2048x1536

Internal storage: min. 32 GB

Support for microSDXC min. 128 GB

BT 4.1, GPS, WiFi, microUSB

Cameras: back min. 8MPx, front min. 2MPx

Battery min. 5800 mAh

Tablet (380 Euro)

OS: Android 5.0 or newer

CPU: min. 8-core, AnTuTu v.5 min. 36000

RAM: min. 3 GB

Display min. 8”, 2048x1536

Internal storage: min. 32 GB

Support for microSDXC min. 128 GB

BT 4.1, GPS, WiFi, microUSB

Cameras: back min. 8MPx, front min. 2MPx

Battery min. 4000 mAh

Cabling and switch for 3 rooms

To specify exact hardware, one needs to know room size, number of end users and building dispositions. General requirements are:

Cabling: category min. 5E

Switch: minimal speed 1 GBit/s

Co-funded by the
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of the European Union

Server for OpenLabyrinth

Processor: min. 4 cores, max. TDP 45W, min. Passmark 8000

RAM: min. 16 GB DDR3

SSD: 2x min. 200 GB SSD SATA3, min. 3 DWPD

Network: 2x GbE

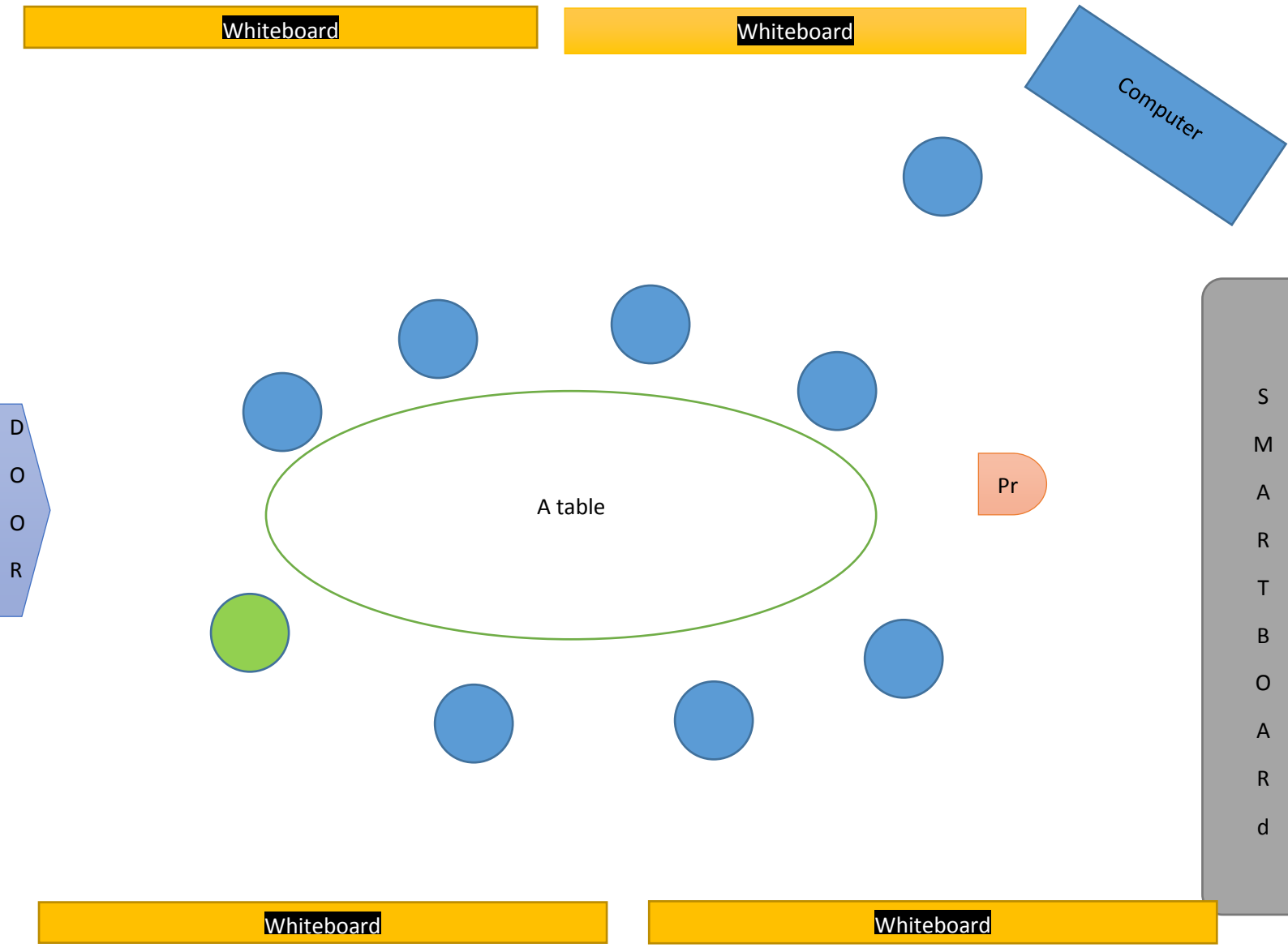
PSU: redundant PSU, min. 80+Platinum

Case: max 1U with redundant fans, hot-swap disk bays

Management over IPMI

OS: Ubuntu Server 14.04 64bit.

7.22. Example of room set up



- wheelchairs for students and a tutor

Pr

- Projector