11% are surgeons and only 25% are Medical Directors. Women bring unique qualities within leadership such as compassion, innovation, sincerity and empathy, which are key for balance to any team.

To address this issue a Deputy Medical Director, RCP tutor and CMT delivered a one day national free conference aimed at medical female doctors entitled 'Women Empowering Women' to enable, educate, inspire and empower women to apply for senior positions within the NHS. The day took place at the Sandwell and West Birmingham NHS Trust. Delegates from across the UK attended.

Women bring unique qualities within leadership such as compassion, innovation, sincerity and empathy, which are key for balance to any team.

The day involved inspiring talks from females in leadership and management roles, including the President of the Women's Federation as well as workshops including Research and Academia, Management and Leadership as well as Teaching and Education.

Further workshops included having babies and less than full time working as well as self care.

The key aspects that were being addressed was

1. Role modeling – showcasing individuals who are in senior leadership positions and sharing their journey 'If you can see it you can be it'.
2. Processes – maternity rights to application of jobs were addressed.
3. Mindset– positivity and surrounding yourself with energy and removing the imposter syndrome mentality.

A workshop addressing self - defence and dealing with inappropriate behavior in the workplace was also very popular and stories were heard as well as strategies moving forward to address this.

From this day many initiatives are being generated at our Trust including a Women's network and mentoring scheme for females.

Enhancing Your Leadership and Management Skills

15 THE FOUNDATION FORUM: A PLATFORM FOR DEVELOPING LEADERSHIP IN MEDICAL EDUCATION AMONGST FOUNDATION TRAINEES

¹Murtaza Kadhum*, ¹Pierre Sinclair, ²Chetan Narshi. ¹Oxford University Clinical Academic Graduate School, Oxford University; ²Department of Rheumatology, Stoke Mandeville Hospital, Buckinghamshire NHS Foundation Trust

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Foundation forums have been adopted over the last few years to provide representation for newly qualified doctors. These forums, however, do not develop essential leadership, management and quality improvement skills for those recruited, key attributes that have been formally identified by recent GMC guidance. A foundation forum was set up across three Oxford deanery hospitals. Forum members were assigned classical forum roles, but were also tasked to

complete quality improvement projects, organise a national quality improvement conference and undergo formal leadership and management training. Members were surveyed before and after training completion, revealing statistically significant confidence increases in leadership, management and quality improvement skills. All members revealed an eagerness to continue formal leadership and management training. The foundation forum proved a successful initiative to improve overall trainee experience and involvement, whilst providing a platform for leadership and management training to satisfy key domains within the Medical Leadership Competency Framework.

16 FOUNDATION MENTORSHIP SCHEME PILOT PROGRAMME: IS NEAR-PEER MENTORSHIP AN EFFECTIVE WAY TO LOOK AFTER INCOMING FY1S?

Ananth Srinivasan, Maria Tados*, Isabel Nelson, Mark Zimmerman, Samuel Haynes, Sigourney Dicksbury, Huma Naqvi. Sandwell and West Birmingham Hospitals NHS Trust

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Background Foundation Mentorship Scheme (FMS) is a near-peer lead programme developed by Foundation Year 2 (FY2) doctors for Foundation Year 1s (FY1s) as a pastoral adjunct to the education (ES) and clinical supervisor (CS) framework.

Aims FMS aims to provide a point of contact for FY1s; to bridge the gap between FY1s and ES/CS, troubleshoot on the shop-floor, help with e-portfolio and offer pastoral support.

Methods Mentors recruited from a pool of FY2s at a District General Hospital in Birmingham UK were matched in 1:4 groups with FY1s on concurrent rotations. Two meetings were undertaken per rotation, with further meetings as necessary. Quantitative Results were obtained using online surveys and qualitative feedback provided post-meetings.

Results FMS commenced 2 months into the first rotation with 33 FY1s. Thirteen (40%) FY1s engaged with the programme, ten (30%) opted out, four (12.5%) were unaware of the scheme. Five (16%) were unable to meet their mentors. 92% of engaging FY1s found the scheme useful, with 94% agreeing FMS would be invaluable if commenced earlier. The themes indicated FMS was most useful during the first rotation when FY1 learning curve is steepest; highly appreciated in surgical specialties; and effective in advising on e-portfolio. Other concerns included managing difficult colleagues; under-staffing; over-staying contracted hours; and teaching. Concerns were escalated appropriately to Foundation Programme leads.

Conclusion Challenges were encountered during scheme development. A significant proportion of FY1s opted out due to late commencement of the programme. Challenges coordinating across two hospital sites contributed to drop-outs. This scheme greatly benefited the engaging FY1s. To facilitate its success, FMS should be integrated with FY1 induction with protected time reserved for mentor meetings. Mentorship is a significant responsibility and formal training should be offered to mentors, especially in handling pastoral concerns.