Conclusion Clear leadership from the senior research team enabled UHBW to increase recruitment to UPC RCTs, contributing to vital Covid-19 research. A research rota and clear communication via secure networks enabled this. Expanding the research team to include junior clinicians created effective and sustainable trial recruitment. Four APIs completed the scheme, and four PAs have enrolled, ensuring ongoing clinician training.

Applying to core surgical training has always been a competitive and ambitious path with many applicants reaching out to expensive courses or literature to guide them through the application process. The COVID-19 outbreak heightened the difficulty and severed connections to previous support tools for foundation doctors interested in pursuing a surgical career during the pandemic. In the East Midlands, we identified this weakness and aimed to create a conduit to support our trainees through their application process.

The Surgical Buddies Scheme was created in September 2020. This scheme involved connecting current Core Surgical Trainees (CST) doctors with keen Foundation doctors interested in applying to CST. The intermediary, buddy scheme organizers matched juniors with the tutors based on shared interest and location.

26 foundation doctors (FY) joined the scheme across seven sites. The FY two doctors were given priority and were matched up with 22 CST doctors. Feedback forms were distributed to collect qualitative and quantitative data regarding their participation. The Feedback summary forms showed that the most common used contact platform was zoom (35.7%) and texting for additional support (35.7%). The average hours of contact spent were 4.2 hours. The qualitative feedback data from the FY doctors showed all their initial pre-scheme objectives were met.

Effective leadership led to the initializing and distribution of a Buddy network system to offer a one-to-one contact between applicant and tutor. The initiative of the original scheme led to a large team of tutor collectively supporting and guiding our cohort of applicants.

The success of the scheme was recognized by the Nottingham University Hospital (NUH)NHS trust Postgraduate Medical Education Team (PMED). The scheme expanded into a specialty specific NUH Peer Support Scheme. The CST application ideology has been extended to internal medical training, Psychiatry and General Practitioner training schemes.

Background Working as a core medical trainee during the ‘first wave of COVID-19’ I had personal experience of the worries and concerns of a trainee and felt that correspondence with junior physicians was poor, impacting on trainees’ wellbeing. As a leader and education fellow I was able to apply my learning from postgraduate studies in leadership to improve Internal Medicine Trainee’s experiences at Surrey and Sussex Healthcare Trust.

Aims
- Identify key issues and possible solutions surrounding communication between the trust, Royal College of Physicians (RCP) and Internal medicine trainees (IMT)
- Develop and implement a range of interventions and strategies to provide additional support for IMT’s, including providing ongoing teaching within different environments.

Methods Whilst learning about different models of leadership, I was most interested in the ABC of compassionate leadership.

Autonomy and control – I had regular meetings with the RCP tutor to share concerns and anxieties of the trainees and provide answers. I used a weekly email during the peak of the pandemic to inform about upcoming changes.

Belonging - I introduced a ‘buddy’ system pairing an IMT to a senior registrar.

Competence – At East Surrey Hospital teaching and education continued. I set up the recording of these sessions and sharing them on the education campus website, so that trainees can access learning events at anytime.

Results Feedback collected from a survey reported advantages such as clinic support, exam help, career planning and changes with COVID. Being able to access online teaching has been invaluable for trainees to catch up on missed teaching sessions.

Conclusion Developing a more measured, compassionate and supportive leadership has many advantages and can lead to improvements in medical training, improving wellbeing of staff.

The key to improving medical education and training will be listening to trainees and communicating uncertainty.

The Medical Leadership Competency Framework encourages both medical students and clinicians to actively engage in medical leadership and management (MLM) opportunities. The framework highlights that student-led societies are one way of achieving this objective. Due to the COVID-19 pandemic, the importance of social media became paramount in actively engaging users to the field of MLM topics. This study aims to examine the effectiveness of a social media approach in actively engaging medical students and clinicians to MLM topics.

At the start of the 2020/21 academic year, the Birmingham Medical Leadership Society (BMLS) selected two medical students onto their committee with experience of social media management and building a large virtual ‘following’. They