

OP0365-PARE **WORK MATTERS: A UK WIDE SURVEY OF ADULTS WITH RHEUMATOID ARTHRITIS AND JUVENILE IDIOPATHIC ARTHRITIS ON THE IMPACT OF THEIR DISEASE ON WORK**

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Background: 10 years ago, NRAS ran a survey and found that people with RA are less likely to be in employment than the general population, and that there are significant barriers to work.

Objectives: To understand how the situation has changed over the last 10 years, NRAS surveyed over 1500 people with RA to understand their experiences.

Methods: NRAS worked with the University of Manchester (UoM) to develop open and closed questions to explore the current state of employment of people with RA, as well as barriers to remaining in and returning to employment. The survey was developed jointly with UoM and contained validated questionnaires on absenteeism and presenteeism. The survey was distributed by NRAS to its members through email and non-members through social media.

Results: 63.3% of people surveyed were in employment, an increase from 2007 when this figure was at 54.8%. However, a significant number of people were concerned about the possibility of remaining in the job if there were any changes to the nature of the work. Participants commented on the challenges and advantages of work, with the primary advantages being financial security, sense of purpose and enjoyment, and the employer/working environment. However, many of the barriers to work included the role being too demanding, RA symptoms, lack of reasonable adjustments, the commute, and the lack of an understanding employer/colleagues. Almost 40% of participants stated that their employers did not understand the disease and that help that was not available. Nearly half of all respondents had to use annual leave in order to deal with their RA; this being just one example of how employers had breached the Equality Act 2010. The survey found that low numbers of people claimed benefits with Disability Living Allowance and/or Personal Independence Payments and Blue Badge being the most commonly claimed. Many participants had co-morbidities, with high numbers of people reporting mental health issues.

Conclusions: Fewer people are losing their job or retiring early due to the disease which may be due to better and earlier treatment. However, the attitudes of employers and colleagues can have a great impact on the ability of someone with RA to remain in work. Progress must be made to raise awareness of employers' responsibilities in relation to employees with disabilities, but also to signpost employers to help that is readily available for them.

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The challenges of rheumatology trainees in the clinical learning environment

OP0366 **AMBULATORY RHEUMATOLOGY TEACHING DAY – A 360-DEGREE EVALUATION OF STAKEHOLDER EXPERIENCES**

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Background: The Dunedin School of Medicine, New Zealand, include an ambulatory teaching day for 5th year medical students within their rheumatology

curriculum. This day involves clinical lectures, examination skills, and clinical assessment of patient volunteers. This is often the students' first experience of conducting a rheumatology consultation.

Objectives: To evaluate the effectiveness of the Ambulatory Rheumatology Teaching Day from the perspective of all involved stakeholders, to inform ongoing development of this teaching programme.

Methods: Independent focus groups of patients (two groups, n=12), consultants/clinical lecturers (one group, n=4), and 5th year medical students (four groups, n=19) involved in ambulatory rheumatology teaching days were conducted. Transcripts were analysed using thematic analysis, and themes compared across the three stakeholder groups.

Results: All stakeholder groups found the ambulatory day well-structured, educational, and inclusive. Patient contact provided a bridging opportunity between theory and practice; students reported a broader perspective on the lived experience of rheumatic conditions, and improved clinical and examination skills. Consultants found the one-day format created scheduling issues with their clinical workload, and suggested two half-day sessions would enable all rheumatology consultants to input into at least one of the sessions. Students and patients supported this format; students further suggested radiology and laboratory diagnostic tutorials prior to the ambulatory day, to aid their clinical assessment experience. All stakeholders observed that student diagnosis was mainly dependent on pronounced clinical presentation. Students were competent in diagnosing rheumatoid arthritis and gout, but failed to diagnose ankylosing spondylitis and calcium pyrophosphate dihydrate crystal deposition (CPPD). Greatest knowledge gains were reported for the conditions of ankylosing spondylitis and psoriatic arthritis. While students reported no interaction issues with the patients, both consultants and patients observed that several students were hesitant to conduct the physical examination, appearing concerned they may cause pain to the patient. Accordingly, students expressed a preference for more clinical supervision during the patient examinations; whereas the consultants favoured the student being independent, developing their questioning skills to improve their examination technique. Patients supported this independent approach to teaching the clinical assessment, and suggested the use of prompt sheets to engage the students in questioning regarding clinical presentation, symptoms, and medications.

Conclusions: The ambulatory rheumatology teaching day provided a supportive and effective learning environment for introducing 5th year medical students to the patient consultation process. Students gained both clinical skills and a valuable understanding of the patient perspective of a variety of rheumatic conditions. Students would further benefit through prior tutorials on diagnostic skills, with a focus on interpretation of radiology and laboratory results. Additionally, enhancing the role of the patient as teacher will aid the examination process, and highlight the importance of both clinical and patient outcome priorities.

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OP0367 **USING YOUTUBE TO TEACH THE FUNDAMENTALS OF RHEUMATOLOGY: A TWO-YEAR RETROSPECTIVE ANALYSIS OF FOUR ONLINE LECTURES**

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Background: Duesseldorf has a dedicated rheumatology unit; therefore, education in rheumatology takes up an increased portion of the medical curriculum. Furthermore, most medical schools in Germany have very few or no lectures on topics in rheumatology. According to the German Society of Rheumatology, one reason for the lack of lectures is the absence of dedicated rheumatology teaching units. To improve education in rheumatology offered to medical students at these universities, we hypothesise the use of online platforms such as YouTube to be a potential in delivering content.

Objectives: Investigating the potential of YouTube to deliver online lectures in rheumatology.

Methods: Online lectures were created by a physician from the Department of Rheumatology at University in Duesseldorf and the e-Learning platform Amboss. Content was matched with the educational goals of the Department of Rheumatology from the 2016 curriculum and the educational goals for rheumatology from the IMPP ('Institut für medizinische und pharmazeutische Prüfungsfragen'), which is responsible for the medical state examination ('Staatsexamen') in Germany. Lectures were produced in German and the overall length of the content was 36 min and 27 s. The content was divided into four short lectures (range, between 6:49 min and 13:27 min) and made available to the public via the online streaming platform YouTube. Information on the age, sex, and location of viewers was collected and analysed. Lectures were analysed for the number of clicks, total watch time, average watch time, and the types of devices used to access content. Analysis was performed over a 20 month period (04/16–01/18). The integrated feature of the platform YouTube Analytics was used for analysis.

Results: Viewers from 108 different countries accessed the content, with 95.1% streaming from three countries with German as a native language (Germany,