

Editorial

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The Renovated Face of EHA Classical Master Class: A Survey-based Evaluation on Behalf of the EHA Campus Working Group

Carmelo Gurnari^{1,2}, Malik Bouaziz³, Joana Marinova³, Nathalie van Havre³, Konstanze Döhner^{3,4}, Muhlis Cem Ar^{3,5}

Correspondence: Carmelo Gurnari (carmelogurnari31@gmail.com).

In Europe, continuous medical education in hematology is offered by a number of associations and organizations, mostly under the form of webinars or meetings. Online interactive activities are also found, but most of the times, these courses are funded and offered by the pharmaceutical industry. Furthermore, a high degree of heterogeneity is present as to the overall organization of the hematology specialty across the countries, with variation in the length of training and inclusion of specific competences such as pediatric hematology, transfusion medicine or hematopoietic stem-cell transplantation and cellular therapy.¹

To overcome the above-mentioned shortcomings and harmonize education in hematology, the European Hematology Association (EHA) has developed several programs.^{2,3} Education at EHA is structured and based on the European Hematology Curriculum, which provides recommendations on minimum levels of competences, knowledge and skills in the field of hematology.⁴ This document was first introduced in 2006, and given the substantial updates in biology, diagnostics and treatment modalities, today has reached its 3rd revision. The portfolio of EHA online courses is created by society members experts in the field, and learning is supported by self-assessment (Progress Test) as well as by a formal European Hematology Exam. Moreover, EHA offers a large number of formats for education spanning from micro-learning on social media (eg, tutorials, pod and webcasts), mentorship and career development for early trainees (the so-called “Lighting the Flame” program) to more structured, peer-group supported

learning initiatives such as the Master Class (in both its Bite-Size and Classical forms).

The Classical Master Class program was initiated with a first pilot trial in 2010 as an online peer-to-peer learning experience for hematologists across Europe and beyond.⁵ This opportunity is offered every year to a selected group of mentees to expand their knowledge on specific topics by challenging them with 5 interactive cases prepared by international leaders in the field over the course of 9 months. The topics span most sections of the European Hematology Curriculum. All the activities are performed under the supervision of experienced mentors who are given the task of facilitating the discussion process. The entire training culminates with the writing of a final report for each case. In the last 2021 edition, as a result of the COVID-19 pandemic and the acquired experience on telematics platforms of virtual gatherings, the Master Class underwent a radical renovation process enabling a dramatic improvement of peer-to-peer interactions as well as peer-to-mentor discussions. Weekly video calls were implemented to facilitate opinion exchange among group members and to intensify the mentorship activities, ultimately promoting scientific debate within each group.

To evaluate this new concept of the Master Class, we have disseminated a survey after the completion of the renovated EHA Classical Master Class program. In particular, we sought to understand the efficacy of the new framework and its impact on the engagement of the mentees as well as on the achievements of interactive learning process among mentees and with the mentors. Results of this year’s survey (N = 28 participants) were compared with the data from surveys of previous editions of the EHA Master Class in the timeframe 2012–2020 (N = 96; Figure 1).

For the 2021–2022 program, a total of 56 mentees were selected and allocated into 7 groups, each with 8 participants and 2 mentors. The majority of the mentees were from European countries (60%), while the remaining 40% were located either in Asia (23%), Africa (13%), or America (4%) (Figure 2A), with equal gender representation. Median age was 34 years (range, 28–59 y) and was similar to that of past editions (median 33 y, range 27–50 y; $P = 0.279$). Analogous characteristics between mentees of the latest and previous editions were also observed as to the length of previous hematology training (median of 4 versus 5 y; $P = 0.503$) as well as weekly time dedicated to the program, with approximately half of the mentees spending 2 to 4 hours for Master Class-related activities (Figure 2B).

¹Translational Hematology and Oncology Research Department, Taussig Cancer Center, Cleveland Clinic, Cleveland, OH, USA

²Department of Biomedicine and Prevention, University of Rome Tor Vergata, Rome, Italy

³European Hematology Association Campus Working Group, The Hague, The Netherlands

⁴Department of Internal Medicine III, University Hospital, Ulm, Germany

⁵Division of Hematology, Department of Internal Medicine, Cerrahpaşa Faculty of Medicine, Istanbul University-Cerrahpaşa, Istanbul, Turkey

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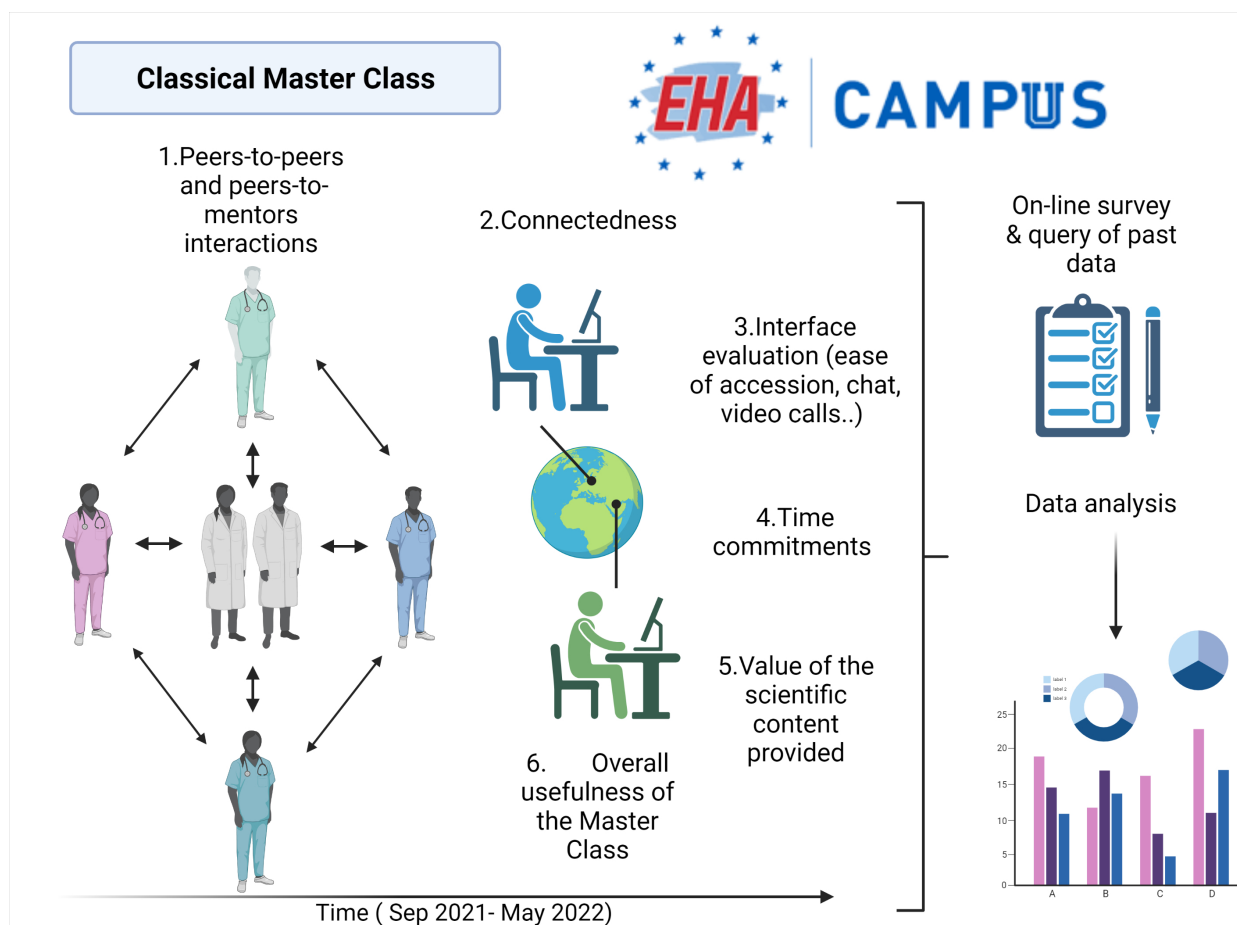


Figure 1. Study design. The figure outlines the study design. We evaluated the new vest of the EHA Master Class by comparing the results obtained from this year's survey to those of past editions. EHA = European Hematology Association.

Overall, the difficulty level of the 5 cases analyzed over the course of the program were judged as “fair” by most of the mentees. Only 5% of the participants evaluated the Master Class as being “too difficult,” which was considerably lower than the 14% in previous editions ($P = 0.005$). Pondering on these results, we asked ourselves whether the perceived differences with regard to the difficulty of the presented cases could be due to a specific implementation of the mentorship program. When looking at the data concerning individual groups and specifically peer-to-peer and peer-to-mentor interactions, we noticed a general improvement of mentees’ satisfaction. Overall, 94% of participants agreed on the utility of peer-to-peer interaction as means for mutual learning, as compared with 88% of past years’ observations. As well, the additional use of weekly video calls facilitated the creation of a group identity, as testified by most of this year’s participants. Furthermore, a paramount role of the new Master Class version was assigned to mentors, who were asked to provide guidance to each allocated group of mentees through weekly video calls, chat interactions, and the ultimate editing of written contributions in the form of a case report. This final summary was then submitted to the scrutiny not only of the mentors but also of the rest of the group for fruitful discussions. Such a new, augmented role assigned to mentors has been the likely reason for the observed improved satisfaction of the participants as to the guidance received this year when compared with previous experiences (93% versus only 57%, respectively; $P < 0.001$). (Figure 2C). As a matter

of fact, the most frequent suggestion expressed in the past editions was the need for a stronger presence of the assigned mentor who could possibly supervise the mentees’ interactions, provide literature references and material, and be supportive in the process of case-solving throughout the weeks. While both options of chat and video calls were given, the majority (76%) preferred the latter (Figure 2D), and almost all participants (93%) found it useful to have a weekly meeting with the mentors to discuss the challenges of the presented case.

Finally, to provide mentees with the opportunity to discuss the most urgent matters and difficult controversies that had emerged during the weekly interactions, an additional meeting with the writer of the case was offered this year. Remarkably, all participants stated that this year’s version of the Master Class met their expectations.

Given the scientific breadth of this initiative, a substantial number of resources—in particular time commitments on behalf of mentors, mentees, and EHA Campus Office members—are required in order to maintain such a program. Therefore, it is critical to perform interim evaluations of its outcomes when trying to introduce new elements and developments. Taking advantage of reports of previous experiences, we have observed an overall improvement of mentees’ satisfaction, specifically with regard to the possibility of receiving constant feedback from mentors—an indispensable moment of the learning process. Furthermore, the availability of a final revision of the cases with leaders in the field enabled the

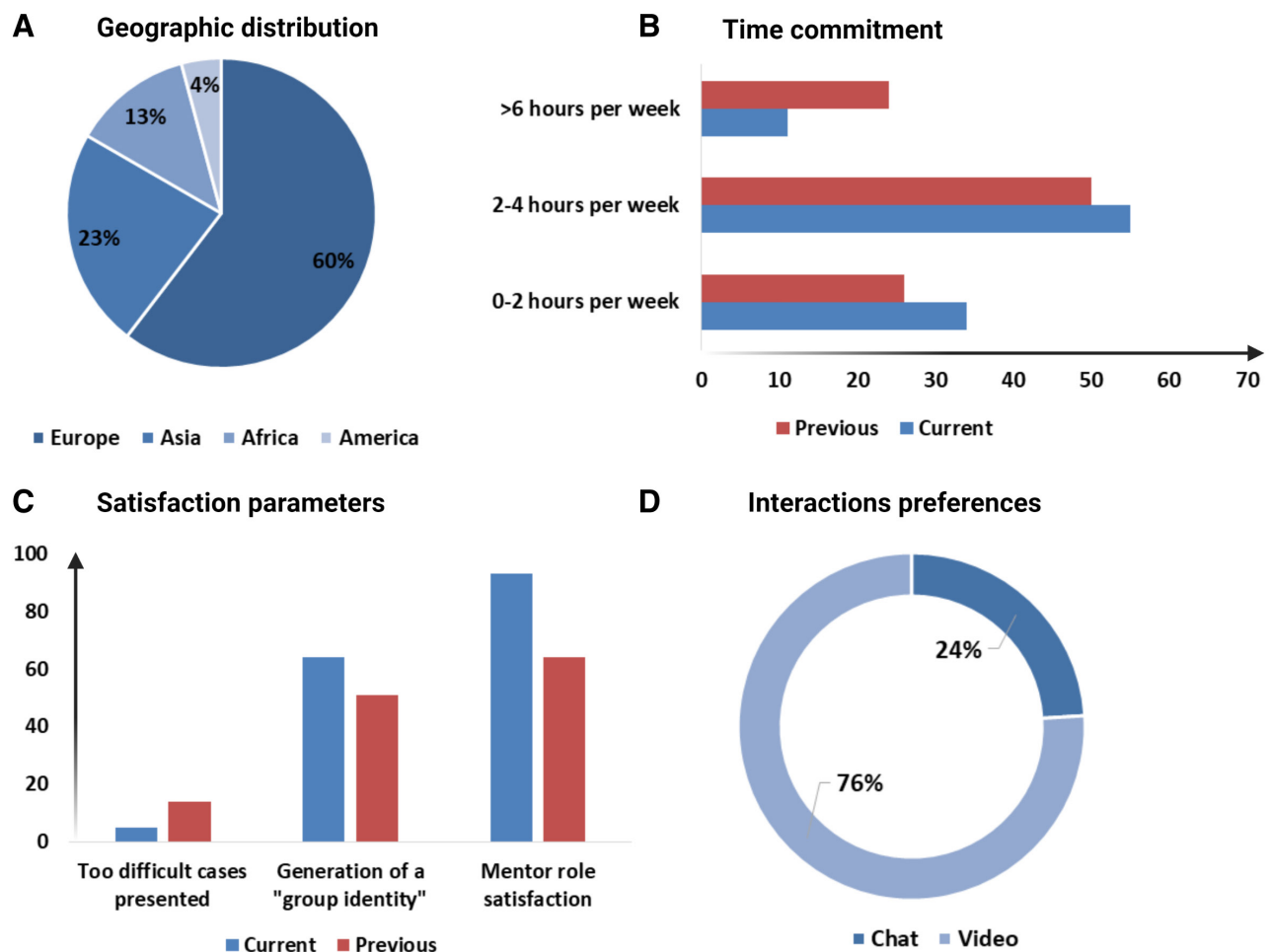


Figure 2. Overview of data of current and past surveys. (A), A pie chart showcases the geographic distribution of mentees of this year's Master Class. (B), The bar graph shows referred time commitment for Master Class-related activities of previous (2012–2020) and current (2021–2022) mentees, whereas (C) illustrates the most relevant satisfaction parameters. (D), The preference of latest edition's mentees as to modes of peer-to-peer and mentor-to-peer interaction.

mentees to enhance their understanding as to the management of the challenges presented by the encountered clinical scenarios. The overall process was facilitated by the use of video calls, which allowed the creation of a vibrant and friendly environment for scientific debate and opinion exchange, and which was preferred to the lesser, sometimes unemotional, chat messaging.

We strongly believe that providing this tangible proof as an evaluation of the new vest of the EHA Master Class program is of paramount importance to develop it further. Free education, providing a platform for "meeting-the-experts" in the field, and harmonization of the hematology knowledge beyond the geographical and political borders of individual countries represent the linchpin of this successful initiative, whose improvements have been implemented over the years thanks to feedback of our mentees community.

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AUTHOR CONTRIBUTIONS

CG and MCA conceived the idea and wrote the article. MB, JM, NvH, and KD provided data and insightful comments. All authors read and approved the final version of the article.

DISCLOSURES

MB, JM and NvH are EHA employees. The authors have no additional conflicts of interest to disclose.

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