

Editorial

Metaphors have always caused me to stop and reflect. Over the last few weeks, myself and others have used the phrase “taking the reins” on several occasions. For most of us, controlling a horse is not an everyday experience, yet the metaphor still has regular usage. A drover becomes accustomed to the habits of the horse: knowing the appropriate levels of control, being aware of idiosyncrasies and having confidence that the horse knows the usual directions of travel. This understanding only comes with experience. So, in spite of being an associate editor for 18 months beforehand, taking the reins of *FoHPE* has not been without its anxieties and surprises. I hope, however, that you will be patient as I learn the craft of editor.

The move online gives us the option of varying the size of the journal, within reason, helping us to better manage our portfolio of accepted papers. For issue 16.3, we have nine papers, offering something that will hopefully interest and challenge you. The tagline for *FoHPE* morphed with the move online, adopting the more appropriate “multi-professional” descriptor. In this issue we have 16 different health professional groups represented, reflecting the evolving ANZAHPE community. Professional diversity allows us to consider how ideas, innovations, pedagogy and theory are used and adapted across different settings and professional practice. Work presented here includes an evaluative study of a large simulated patient programme from Canada (Curran, Reid, Fitzgerald, Heath, & Mullins-Richards), reflecting the gradual growth of submissions from outside Australia and New Zealand. We are also receiving submissions from across Asia and may well see more following our joint conference this year with the Asian Medical Education Association.

Interprofessional learning features prominently in this issue, through simulation activities (Curran; Kerr et al.) and team task reflections (McNaughton). Simulation is picked up again in the setting of radiography, where students comment on the value of role-play and a low-fidelity manikin for positioning and exposure training (Kong, Hodgson, & Druva). The impact of recruiting and using community patient volunteers is explored by Lane, Mitchell, Towers and Wong, whilst another study describes the value of an online digital habitat for developing a community of practice in general practice (Fan & Radford). Two studies describe and explore markers of quality in education through the assessment of performance (Bacon, Williams, Grealish, & Jamieson) and the development of cases for discussion of ethical principles in practice (Kenny). Finally, Bridge and Carmichael present an approach to eliciting real-time interactive student feedback on courses using an audience response system.

At our annual conference in Newcastle, Prof Michael Iwama introduced us to another metaphor inspired by his Japanese heritage: “kawa”, the river. He described the journey of a river from source to sea, with the natural changes in depth, width, flow and debris—the journey being akin to one’s life. In disability care, he asks his students to think about patients as being at a point on this journey and to consider what factors are contributing to effective and ineffective water flow in their river. *FoHPE* had its first issue in 1999, so it is well into its teenage years. One of my roles is to look at the

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journal's "kawa" and to identify the fauna and flora that should be encouraged and the obstructions that need to be cleared. Looking forward, my first desire is to ensure the regular production of the journal and to gradually clear some of the backlog of submission handling that has occurred for a range of reasons. In 2015, we will have a fourth issue for volume 16 and then begin with volume 17 in 2016. This takes us back to our roots, when volumes were within a calendar year.

For the Board of *FoHPE*, it has been both exciting, challenging and frustrating to guide the journal online. The processes are now firmly in place for publication. The systems for submission and review have been harder to work through. We ask authors to bear with us and to continue to use the existing system for the time-being. The transition will come, but we need to ensure that the processes are fit for purpose and reliable.

The reins are feeling a little more natural in my hands, and I look forward to seeing the landscape change as we move along. Explore this issue, engage with the content and share what you read and learn with your colleagues in health professional education.

Andy Wearn

Editor

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