PostScript

NOTICES

Healthcare: Is Europe Getting Better?

20th January 2005, Renaissance Hotel, Brussels.

For more information, please visit: www.Europeanvoice.com.

10th European Forum on Quality Improvement in Health Care

13th to the 15th April 2005, ExCel Conference Centre, London, UK.

To request a brochure or submit an abstract, please visit: <http://www.quality.bmjpg.com>.

Postgraduate Certificate in Evidence Based Health Care

20th September 2004 to the 30th September 2005, University of Oxford Department for Continuing Education, UK.

The Certificate is intended for health professionals who wish to obtain the skills that are needed to access existing evidence, disseminate evidence, and use evidence to promote informed decision making. The programme seeks to accommodate the busy and demanding work schedules of healthcare professionals and, therefore, is provided on a part-time basis. The Programme also offers flexibility in allowing candidates to choose empirical topics for study which are relevant to their professional needs and interests besides providing a core body of knowledge, skills and expertise in evidence-based health care thus allowing a progression from learning how to use evidence-based health care to how to establish it.

For further information or to receive application details contact: Health Sciences

Portfolio, University of Oxford Department for Continuing Education; tel: +44 (0)1865 286941; email: cpdhealth@conted.ox.ac.uk; <http://www.conted.ox.ac.uk>.

Managing Change in Health Care

10th to the 14th January and 4th to the 8th April 2005, University of Oxford Department for Continuing Education, UK.

This 10 day course uses a combination of action learning and work based learning to teach principles of change management to health professionals. Four key steps to change management are used to resolve work based healthcare issues and contribute to clinical effectiveness programmes: conducting organisational analysis; working with multidisciplinary teams to identify appropriate strategies for change in your workplace; implementing plans for health care improvement; developing feasible methods for monitoring change; and overall evaluation of the process. The course provides:

- Flexible learning for professionals with limited time
- Ongoing tutor support for a work based project
- Transferable skills and materials applicable to varied change management projects

For further information or to receive application details contact: Health Sciences Portfolio, University of Oxford Department for Continuing Education; tel: +44 (0)1865 286941; email: cpdhealth@conted.ox.ac.uk; <http://www.conted.ox.ac.uk>.

Process Improvement Courses

Until end of March 2005, George Mason University.

For further information or to receive application details please go to: <http://cqi.gmu.edu>

CORRECTIONS

doi: 10.1136/qshc.2004.009886.corr1

In supplement 1 this year, October 2004, the paper by J B Cooper and V R Taqueti (A brief history of the development of mannequin simulators for clinical education and training. *Qual Saf Health Care* 2004;13:i11-i18) was missing an acknowledgement, which follows: The authors thank Drs Richard Satava, Steve Dawson, Dwight Meglan, and John Schaefer for providing historical information and insights for this article.

In the quality improvement report by Muller *et al* (*BMJ* 2004;328:934-8; reprinted in *QSHC* 2004;13:444-449) a misunderstanding during editing led to an error in reporting the authors' methods. In the third paragraph of the section "Strategy for change", the correct text should read, "We provided [not obtained] feedback twice during routine staff meetings" and "We presented [not determined] the proportion of patients who had received allogenic or autologous blood transfusion after total joint replacement". Technology led to a further slip, this time at proof stage. At the end of the fourth paragraph of the section "Effects of change", a confusion caused by "track changes" resulted in the misrepresentation of an increase in units of transfused blood. The correct increase in units of transfused blood in Zurich should be from 52 700 to 60 600 (+15%) [not plus/minus 15%].