these clinical skills. Average confidence was 2.39 out of 5, rising to 3.12, 2.46, 3.71 and finally 4.0 after each consecutive session (Figure 1).

Improvement in confidence was also seen in all four clinical domains. The area in which students demonstrated least confidence was Procedural Skills.

Discussion, conclusions and recommendations The programme is now part of the ongoing 3rd year student placement at Algrevin General Surgical Unit, currently running for the 5th time, and so further data is being collated. Data so far reinforces the value of simulated scenarios as a teaching method, and not solely as an assessment tool. Introducing a simulated skills programme not only enhances medical student confidence in clinical skills but also in their approach to OSCE examinations.

REFERENCES

SC21 SIMWARS IRELAND: INTERVARSITY COMPETITION FOR MEDICAL STUDENTS IN EMERGENCY MEDICINE
Hick Paula*, Power Dave, Hick Dave, McGuire Kevin, Henn Patrick, O’Reilly Barry. ASSERT Centre, University College Cork, Ireland
10.1136/bmjstel-2019-aspihconf.54

Background SimWars Ireland was founded in 2017 at University College Dublin (UCD) as an intervarsity competition for medical students with a special interest in Emergency Medicine. Its primary aim is to increase the practice of simulation education among students.

Project description Medical students from 1st year to 5th year in Ireland’s 6 medical schools train over the course of the academic year, with their respective inter disciplinary coaching teams, consisting of; Paramedics, Nurses, NCHD’s, Consultants and Fire Service Personnel, to have a chance to win the title. The programme is now part of the ongoing 3rd year student placement at Algrevin General Surgical Unit, currently running for the 5th time, and so further data is being collated. Data so far reinforces the value of simulated scenarios as a teaching method, and not solely as an assessment tool. Introducing a simulated skills programme not only enhances medical student confidence in clinical skills but also in their approach to OSCE examinations.

Conclusion Medical Students are enthusiastic to participate in and learn and practice their clinical skills in this competition setting. This competition model has application for teaching and learning for other clinical domains and healthcare disciplines, with potential to provide opportunities for future research and human factor training through simulation.

REFERENCES

SC22 TEACHING EMERGENCY ASSESSMENT TO MEDICAL STUDENTS (TEAMS): INTRODUCING MEDICAL STUDENTS TO AN ABC APPROACH USING VIRTUAL REALITY
1David Wright, 1Kathryn Harvey*, 1Emma McQueen*, 1Prateek Verma, 1Tom Miller, 1Elizabeth Smithson. 1Hull Institute of Learning and Simulation, Hull, UK; 2Hull University Teaching Hospitals NHS Trust, Hull, UK
10.1136/bmjstel-2019-aspihconf.55

Background The clinical environment offers little chance to gain practical experience in medical emergencies as a medical student. Simulation can be a safe and effective tool to enhance contextual learning in undergraduate medical education, however it is often limited due to cost and organisational issues (Aggarwal et al., 2010; Ziv et al., 2003). Virtual Reality (VR) can provide high quality, immersive training in a less resource-intensive manner. Interactive VR simulation allows the user to manipulate what happens in the clinical scenario by, for example, being given on-screen options.

Summary of project The aim of the project is to compare how effective standard 360° VR is compared with interactive 360° VR as a teaching tool for medical students to help standardise and reinforce knowledge. We have created a VR video aimed at 4th and 5th year medical students that models the ABCDE approach to critically ill patients, specifically septic shock. This has been created using monoscopic 360° VR. An interactive VR version is currently in development, whereby the students are able to have some control over the scenario by choosing on-screen prompts.

This will be trialled on approximately 20 students initially across our local medical school. Students will be able to view environment to medical students. After an initial semifinal, held within the respective medical schools in November, the winning group of students and their respective coaching teams compete in a national competition to win the SimWars Ireland title. Two hundred students participated in the 2019 final in UCC’s ASSERT Centre (https://assert.ucc.ie)
the video remotely on their smartphones using Google Cardboard TM with dedicated virtual reality headsets also available on site.

Students will complete a survey pre and post intervention. The survey will focus on questions regarding self-reported confidence and knowledge prior to the intervention. The post-intervention survey will contain additional questions regarding the video content, ease of use, tolerability and global value. Furthermore, qualitative answers will be sought in terms of free-text feedback.

Summary of results Work in Progress

Discussion, conclusion and recommendations

We have created the standard 360° VR through storyboard planning and script writing. We filmed scenes using associate simulation fellows, simulation department staff and actors. We will film the interactive 360° VR with on-screen options throughout the video to allow knowledge assessment and interactivity. Our hypothesis is that increased interactivity and audience participation will help solidify learning amongst medical undergraduates.

REFERENCES


Wednesday 6th November, 10.00–11.00

SC24 IMPROVING CARDIAC ARREST RESPONSE SYSTEMS IN A MENTAL HEALTH UNIT USING LARGE-SCALE IN SITU SIMULATION

1. Michael Creed*, 1,2,3Bronwyn Reid-McDermott, 1,3Maria Costello, 1,3Seran Maher, 1,3Margaret O’Grady, 1,2,3Dara Byrne. 1Irish Centre For Applied Patient Safety And Simulation, NUI Galway, Galway, Ireland; 2Galway University Hospitals, Galway, Ireland; 3National University of Ireland, Galway, Ireland

Background A new Acute Adult Mental Health Unit (AAMHU) recently opened in Galway University Hospital, remote from the main hospital building and replacing the previously co-located unit. Due to infrequency of on-site medical emergencies, and the lack of familiarity of the cardiac arrest team with the location and layout of the AAMHU, concerns were raised with regards response to and management of medical emergencies on-site. In light of this, a large-scale in situ ‘mock-code’ simulation event was implemented to test the existing cardiac arrest response system, and from that develop recommendations to improve patient safety and quality of care.

Summary of project A multidisciplinary team of physicians, nurses, emergency response staff, a resuscitation officer, security and simulationists collaborated to plan the simulation event. Two mock cardiac arrests were simulated on the top and bottom floor of the unit. The exercise was audio recorded, and observers positioned throughout the AAMHU took field notes on the response of each participating discipline making note of barriers to the delivery of effective care. A multidisciplinary debrief was conducted after each mock code. Data collected were analysed using a thematic content analysis.

The findings from the event were compiled as a report for hospital management, with recommendations to improve process and policy regarding emergency response in the AAMHU. The mock cardiac arrests were repeated eight months later to test implementation of recommendations and to assess for improvement in cardiac arrest response.

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SC23 THE CHALLENGES OF SETTING UP A REGIONAL SIMULATION ORIENTATED TEACHING FELLOW NETWORK – A REVIEW OF THE NORTH EAST SIMULATION TEACHING FELLOW INTEREST GROUP (NESTFIG)

Christopher Taylor*. North Tees University Hospital, Hardwick Road, UK

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