SC52  A PHENOMENOLOGICAL ANALYSIS OF SIMULATED PARTICIPANTS
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Background Historically, patients were examined for the purposes of medical education. Barrows, (1993) changed this practice, as patient’s portrayed frustration when being examined repeatedly by medical students. Simulated Participants (SPs) are now trained to consistently portray patients from a written scenario for the purposes of teaching, training and/or assessment. Due to this change in practice, there is a growing concern that patients are not being truly represented within healthcare professional education (HPE). Despite SP’s being viewed as the highest fidelity ‘simulator’ in HPE. The key to truly represent a real patient interaction, is achieved through the authenticity of the SP interaction with the learner. SPs are a valued addition to the learning experience and their involvement is superior to written examinations in the assessment of clinical skills (Swanson and van der Vleuten, 2013). Establishing an insight into the live experiences of SPs and how they represent the patients we care for, is pivotal.

Summary of project A hermeneutic phenomenological analysis will investigate SP’s experiences of representing patients. To gain a maximum variation sampling that is purposeful and heterogenetic, it will be conducted across two Universities. Data will be collected using rich pictures to aid minimally structured interviews. Transcriptions to be imported into NVivo for framework analysis. Pending ethical approval from School Research Ethics Committee following minor amendments. This research project has had Personal and Public Involvement (PPI).

Summary of results This project is ongoing. Key preliminary findings of this phenomenological analysis will be presented.

Discussion The implications of these findings will be discussed.

Conclusions and recommendations There is limited evidence on the most effective training of SPs for patient representation. It is believed that this can be achieved through the inclusion of real patients in scenario development. The emphasis needs to be on the importance of learning with, from and about the person.

REFERENCES

SC55  COMMUNITY SIMULATION; ENCOURAGING OUR FUTURE GENERATIONS INTO HEALTHCARE CAREERS A TASTER OF LIFE WITH ‘DARE TO NHS’
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Background The NHS employs above of 1.3 million employees and has more than 350 different careers on offer. The workforce is frequently changing and adapting to new technologies and ways of working, to combat an increasingly pressurised environment and a more diversified population. The NHS ‘Five year plan’ & ‘Step into the NHS’ goes some way to help with change a more diversified workforce although a lot of this is unknown to schools in our area.

With this in mind and being an area with a large ‘widening participation’ ratio for higher education the sim of this project is to give secondary school students the chance to experience and talk with a wide range of healthcare providers in one place at a time they are considering their further education choices (16–19)

Summary and results Building on from experience days looking at training to become a nurse or doctor, an interprofessional group from Great Western Trust, Oxford Brookes University and Bristol Medical school came together to work on a joint project encompassing as many healthcare careers as possible within our local NHS trust. Previously aimed at Year 9 secondary school students & organisationally led by simulation trained staff from the 3 participating institutions, the day incorporates the journey of a patient from ‘road traffic incident’ through to recovery, a Q&A session with staff from various background areas and practical taster experiences in a number of healthcare careers.

Feedback from previous years have noted that the project has been beneficial and from this we have now moved onto inviting Year 10 students instead and widening the net to invite schools with a higher proportion of widening participation students.

Moving forward we are using the feedback forms to collate information with the Higher Education Access Tracker and to gauge how the project has/will impact on the participants, as well as what professions we invite to be more inclusive of healthcare career pathways. Forms will be split into knowledge before & after day and future learning goals.

REFERENCES
course developed by interprofessional multidisciplinary stakeholders. Ideas were pooled from a multi-professional course development questionnaire regarding staff experience, confidence and incident reviews. Rapid improvement cycles (PDSA) resulted in pilot and implementation phases. High fidelity scenarios were generated within the framework of the diamond debrief model based on medically intricate inpatient emergencies. Scenarios focused on human factors in managing cases outside the scope of routine practice development in areas of lowest confidence. These included electrolyte disturbance, renal failure, massive pulmonary embolism, and end-of-life management. The impact of the course was assessed through pre and post-course questionnaires.

Summary of results Preliminary data from delegates and faculty was overwhelmingly positive. 37.5% of responders were registrars, 12.5% senior house officers, 25% senior nurses and 25% staff nurses. The participant skill mix was deemed by 88.9% of questionnaire responders as good or excellent. Pre-course, 50% and 37.5% of responders reported feeling nervous or anxious respectively. Subsequently, all responders felt either knowledgeable, enthusiastic or motivated. 88.9% of responders valued interprofessional multidisciplinary debriefing of issues including: leadership, culture, situational awareness, decision-making and communication. All participants agreed emphasis on collaborative practice was invaluable in improving patient outcomes. Furthermore, a participant has now undergone faculty training.

Discussion, conclusions and recommendations Tackling myths of human factor understanding with simulation training is a novel approach to improve team working within inpatient gynaecology. The Royal College of Obstetricians and Gynaecologists supports this expanding area of non-technical skills to improve patient safety but there is currently little formal training or assessment. We intend to expand the MEG course into a permanently embedded program. In the future, gynaecology outpatient scenarios will increase the acceptability of this course to outpatient professionals. On reflection, this is a powerful modality with the benefit of unifying the interprofessional team and championing collaborative practice.

REFERENCES

USE OF SIMULATION IN PLASTIC SURGERY TRAINEE ASSESSMENT – THE POSTGRADUATE OSCE

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Background Doctors wishing to undertake the plastic surgery training pathway in the UK need to sit for two examinations offered by the Royal College of Surgeons – the Membership of the Royal Colleges of Surgeons (MRCs) examination and the Intercollegiate Specialty Fellowship of the Royal Colleges of Surgeons (FRCS Plast) examination. There is at least a five-year gap between the MRCs and the FRCS Plast with no formal assessment of competence in between. This is why a formative OSCE for plastic surgery was introduced in 2014 in the North West Region to measure the competence of trainees and prepare them for the FRCS Plast examination, and it has been carried out on an annual basis for the past 5 years.

Project description According to Krathwohl (2002), the main learning domains of an OSCE should assess cognitive, affective and psychomotor skills, which is why the blueprint of the formative OSCE included five main groups of stations, namely ‘patient assessment’, ‘explanation’, ‘management’, ‘operative planning’ and ‘operation’. This formative OSCE has been standardised to 20 stations per year, out of which at least 50% involved simulated patients. The remaining stations included high and low fidelity models to assess surgical skills and some multiple choice questions. About 20 candidates sat for the OSCE annually and they received a percentage score – ‘fail’, ‘borderline pass’ and ‘good pass’ - and their ranking within the cohort.

Results On average 65.15% of the candidates passed the exam. A binomial logistic regression was performed to investigate the effect of each group of stations on the probability of passing the OSCE. It was discovered that the group of stations that had the greatest impact on passing the OSCE was ‘patient assessment’; a 1 percentage point increase in ‘patient assessment’ score increases the odds of passing the OSCE by 63%.

Discussion This study showed that a postgraduate OSCE was feasible and sustainable as an annual event. It allowed assessment of the same areas examined by traditional examinations (FRCS Plast) such as patient assessment and management. Additionally, the OSCE allows assessment of other domains including operative planning and operative skills using a full range of simulation models and patients of varying fidelity.

Conclusion This formative OSCE is a useful tool to evaluate the competence of plastic surgery trainees and prepare them towards postgraduate professional examinations. Having a standardised benchmark for a series of simulations is a constructive way of measuring competence.

IS ‘IN SITU’ SIMULATION USEFUL FOR NURSING STUDENTS IN AN HEI?

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Background In situ simulation as a method for learning and rehearsing clinical skills is preferred in clinical practice, due in part, to increased realism and fidelity (Patterson, 2008). However, opportunities for Health Care students to engage in ‘Insitu’ simulation whilst in placement is ad hoc and not equitable due to varying placement opportunities and their suitability for using Insitu simulation as a learning tool.

Summary of education programme or project An innovative Integrated Care Curriculum developed to prepare the future healthcare workforce (Nurses, Physiotherapists, Paramedics, Operating Department Practitioners, Radiographers, Radiotherapists, Speech and Language Therapists, Social workers) to be flexible, resilient practitioners, who understand the value of collaborative working but also have a strong sense of their own professional identity has been created at Sheffield Hallam University and is due to be launched in Sept 2019.

This course places emphasis on simulated learning to provide opportunity for rehearsal and learning from with and about each others professional group in a safe, realistic environment. In situs therefore provided an opportunity to rehearse skills in a safe simulated environment. The In situ simulation experience aims to enhance learning and promote evidence based practice.

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