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.

SC58 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...