the quality of the debrief, and its utility in a wider audience of debriefers.

REFERENCES
2. The Basic Assumption | Center for Medical Simulation [Internet]. Center for Medical Simulation. 2019 [cited 16 May 2019]. Available from: https://harvardmedsim.org/resources/the-basic-assumption/

Abstracts

P81 EFFECT OF SIMULATION BASED NURSING EDUCATION USING INSTRUCTION SYSTEM DESIGN
Yukiko Orii*, Tokyo Metropolitan University, Arakawaku Higashiogu 7-2-10, Japan
10.1136/bmjstel-2019-aspichconf.178

Introduction While considerations of the human rights and efforts to secure safety in medical care are being reinforced, nursing students without nurse licenses are facing a limit in acquiring practical nursing skills during students' days.

In order to fill the gap with the basic skills required in clinical settings after graduation, simulation-based nursing education is conducted by reproducing scenes that can occur in actual clinical settings and using simulator.

In this study, we tried whether the simulator as the teaching materials was useful. And we used the instruction designs devised for the simulation-based educational purpose.

Methods
1. Subjects: 40 nursing students who already ended the clinical training for 1,260 hours
2. Study period: From November 2009 to March 2014
3. [Ethical considerations]
4. The open recruitment was carried out for a study cooperators. We obtained a written consent.
5. The study was conducted by ethics review board.
6. The Simulation Design Scale were translated into Japanese and used in the study with the approval of the author.
7. Instruction System Design

1. Set study goals.
2. Create a patient scenario according to the study goal using a Simulation Design Template.
3. Select equipment required to execute the simulation according to the scenario.
4. The setting time is 15 minutes.
5. Assess the conditions of each patient and report to the person playing the role of leader using SBAR.
6. SBAR.
7. Debriefing: 30 minutes

Results
1. The study goal was set as 'patient's condition after operation can be assessed and reported.'
2. We created a scenario to observe and report conditions of a patient at 30 minutes after returning to a ward after operating surgery.
3. It took 13 minutes on average from assessment of the patient's condition until reporting to the person playing the role of nurse leader using SBAR.
4. The debriefing was conducted for the methods and contents of patient observation and reporting.
5. They felt confused as SBAR is not normally R (recommended).
6. The SDS was 4.2/5 on average.

Discussion The issue is how to utilize it to achieve the best possible educational effect. We designed simulation-based learning using ISD. It was suggested that the simulator was utilized well as an educational material. It also suggested that video debriefing allows us to subjectively look back on our actions based on certain standards and shows the significance of those actions.

Conclusion This study suggested that instruction design need to simulation-based nursing education.

REFERENCE

P82 EDUCATIONAL INNOVATION PILOT OF A SIMULATED SCENARIO
Gail Foster*, Emma Bush, Amanda Crawford. University Of Hull, Hull, UK
10.1136/bmjstel-2019-aspichconf.179

Introduction Rationale and current simulation practice -. Simulation based activities are used to support learning as simulation provides students with a safe environment in which to practice skills (Morrell-Scott, 2018). Current simulated practice at the University of Hull has involved stand alone clinical skills sessions, covering one aspect of practice. A new clinical simulation suite (Allam Medical Building) prompted lecturers to review simulated teaching activities and to recognise simulated practice within the adult nursing programme could be improved.

Aims of the simulation Demonstrate problem solving skills.
Demonstrate prioritisation/delegation skills.
Demonstrate communication skills.
Demonstrate basic life support skills, in accordance with Resuscitation Council (UK) in hospital resuscitation guidance (2015).

Description Scenario - An orthopaedic ward scenario, including cardiac arrest, was piloted with second year BSc Pre-registration Adult Nursing students. Students’ were grouped and randomly allocated to roles. The aims, expectations and purpose of the scenario were shared with students. Students allocated to staff nurse and student nurse roles had a handover with the activity facilitator who assumed the role of ward sister/charge nurse. A second facilitator observed the scenario and instigated the cardiac arrest activity.

Summary of outcomes Debrief -took place at the end of the scenario. Feedback from students and facilitators was positive. Students felt the scenario was realistic and reflected practice. Students felt challenged when assuming staff nurse and student roles. Students felt the cardiac arrest activity provided a degree of realism often lacking when undertaking basic life support with mannequins on the floor.

Discussion, conclusion and recommendations Facilitators felt students engaged well with the activity, demonstrating effective verbal and non-verbal communication skills. Some students demonstrated effective prioritisation and