Multidisciplinary Simulation Training Experience for Acute Diabetes and Endocrine Emergencies

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INTRODUCTION

- Diabetes and Endocrine education can often be lecture based and it is imperative that the workforce feel confident dealing with emergency situations in the clinical setting

AIMS/OBJECTIVES OF PROJECT

- To enhance the knowledge and skills of those working within the acute medical setting dealing with diabetes and endocrine emergency presentations
- To improve the confidence within the workforce utilising local policy and guidelines
- Emphasising the human factors that can be involved in high pressure environments

RESULTS

Outcomes were recorded by pre and post course questionnaires using the 7 point Likert scale linked by a code for comparison whilst retaining anonymity. Qualitative data was extracted from the post course questionnaires. Out of 15 participants only 11 were fully matched and hence could be analysed

GENERAL COMMENTS

‘well-organised’ and ‘nothing to improve’

DISCUSSION

- Simulation is an effective educational modality and this has been reinforced by multiple reviews (1,2,3)
- A mixture of simulation and didactic approaches are more effective than either interactive or didactic approach alone (4)
- Simulation can only form part of the learning process and therefore it is very difficult to translate the skills learnt during simulation to clinical practical

CONCLUSION

- Overwhelmingly positive feedback
- Significant improvement in confidence and awareness of human factors
- Further integrated inter-professional clinical simulation training days should be encouraged amongst all specialties’ to enhance knowledge and ultimately improve patient care.

METHOD

- 1 day inter-professional simulation training with four cases of common diabetes and endocrine emergencies (Hypoglycaemia, Diabetic Ketoacidosis, Hyponatraemia and Addisonian Crisis)
- Students, Nurses and Doctors (FY1 to registrar level)
- Introduction to simulation and human factors, including ‘meeting the manikin’ and familiarisation with the simulation suite.
- Each scenario lasted 15mins followed by a structured debrief addressing the clinical management with reference to both local and national guidelines
- Human Factor skills were explored during the session.

REFERENCES