Simulation as a tool in trainee emergency scenario confidence

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Background

Many junior doctors feel poorly prepared for emergency situations (1). This study examined the role of simulation as a tool to increase foundation doctor confidence in acute scenarios. It also evaluated whether foundation doctors found the course useful, learned from it and subsequently changed their practice.

Method

21 F1 doctors and 25 F2 doctors attended a half day simulation session on acute and common scenarios. Foundation doctors attended each session in groups of 3-4. Each participant completed a scenario of 15 minutes length while the others observed, and they all participated in debriefing each scenario. The scenarios were all based around an ABCDE assessment, of acute mental health assessment, with appropriate escalation and handover to a senior. A pre- and post- simulation questionnaire was used to assess trainee confidence over several areas: overall confidence, airway, breathing, circulation, disability, exposure, mental health, handover and prescribing. Post session feedback also asked whether the training was considered useful, whether attendees felt it had improved their clinical ability, and how likely they were to make changes to their practice based on this session. Likert scale was used for each response (2). A post simulation survey was sent 1-6 months post session to all attendees.

Results

F1 doctors’ average confidence across all areas was 48% pre-simulation and 61% post-simulation, an average proportional increase from baseline of 27%. F2 doctor’s pre-simulation confidence was overall 53% which rose to 63% post-simulation, a proportional increase of 20%. For both cohorts there was increased confidence in all areas assessed. Usefulness of session was rated at 99% and likeliness to change practice at 95%. A post simulation survey was sent 1-6 months post session to all attendees. This survey is currently still open but responses so far (n=9) report 78% have made changes to practice and 11% have not yet but intend to. Examples of changes reported include increased confidence in speaking up in emergencies, improved handover, keeping an open differential, and tackling a problem systematically using ABCDE assessment.

Key messages

Simulation has led to an increased level of confidence, learning and subsequent changes to practice amongst junior doctors across all areas assessed. It is hoped that these changes to practice will ultimately result in improved patient care. Moving forward we aim to ensure this is maintained by working to integrate simulation into Foundation Teaching throughout their training.

References

2. Likert, Rensis (1932): A technique for the measurement of attitudes, Archives of Psychology, 140(1), 44-53