

LEARNING TOGETHER

Enhancing multidisciplinary learning in a paediatric acute receiving unit through implementation of a multi-professional imbedded simulation programme

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Introduction

It is widely recognised that paediatrics can be a senior lead specialty, which can have a disempowering effect on junior staff being confident in assessment of the deteriorating patient. This confidence is further compounded by reduced team integration, resulting from frequent staff rotation and ad hoc shift patterns which are inherent to a busy paediatric acute receiving unit.

Following review of the current simulation programmes within our tertiary paediatric hospital, the need was identified for an education programme targeting nursing staff and junior medical staff based in our paediatric acute receiving unit.

Our aim: To implement a simulation program to enhance both clinical skills and team work to improve patient care

Method

- A weekly simulation programme was established within the paediatric acute receiving unit.
- Sessions were led by a senior registrar, supported by a clinical fellow and sim technician.
- Topics were designed to be realistic of patients that nursing staff could initially assess then escalate about to junior medical team.
- Scenarios were carried out in real time.
- Learning from the sessions was gathered and shared with in the wider team through departmental newsletter
- Participant surveys were completed pre and post attendance for feedback on access to the sessions, learning from the individual and confidence levels.

Discussion

Further thematic analysis of qualitative feedback emphasised the value of multidisciplinary involvement, real-time ward-based simulations, and supportive reflective environments.

Additionally, all sessions were facilitated by a paediatric registrar. Despite only 25% of facilitators having prior formal simulation training, the feedback consistently recognised high engagement. This demonstrates the feasibility to expand the facilitator role across the senior trainee cohort.

Key challenges of imbedding a weekly programme included inconsistent attendance and conflicting medical/nursing scheduling. 96% of the sessions were attended, with 50% were attended by the ideal staffing numbers of 2 doctors and 2 nurses. Participant levels were often supplemented by healthcare assistants and/or students.

Contemporaneous discussions and team reflection recognised the suboptimal attendance could be improved with an adjustment to the start time and method of allocation to the sessions.

As an ongoing project we continue to gather and act upon feedback to optimise educational content and finesse the practical delivery to achieve a sustainable simulation programme.

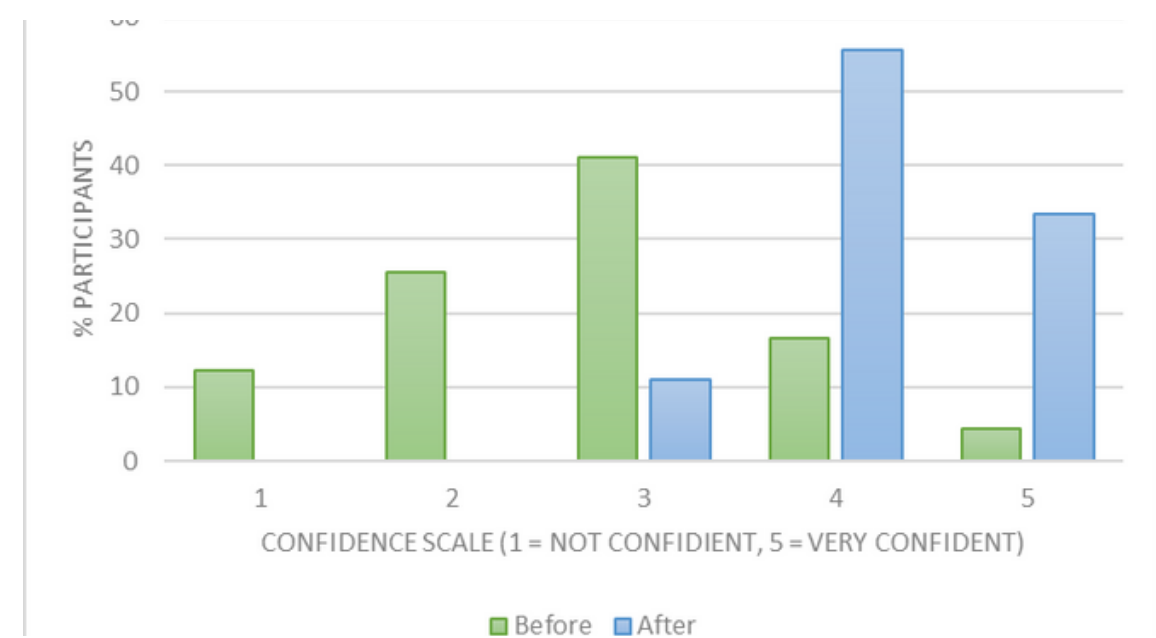
Conclusion

The paediatric acute receiving simulation programme demonstrated significant benefits in clinical training through interdisciplinary simulations. Further development is essential to optimize participation, learning outcomes, and session efficiency.

Results

Since the programme was commenced in August 2024, 25 simulation sessions have been conducted. With feedback gathered from 90 participants

Post session feedback demonstrated increased confidence levels as shown on table 1.



With participants finding the sessions highly 'useful'. As seen on Figure 2 and the wide range of participants in figure 3.

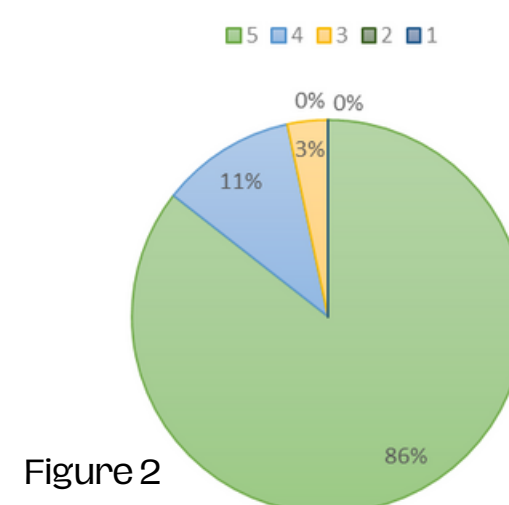


Figure 2

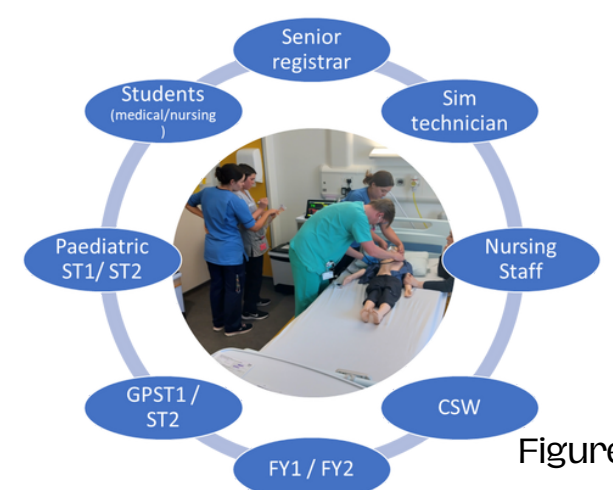


Figure 3

Participant feedback demonstrated the value of multidisciplinary collaboration:

Really useful and good to have nursing staff involved too

Having as many in real life and in real time components as possible is really helpful!

Very well run, nice to have the whole team

Really useful sim, supportive environment, very common scenario! Thank you! Useful for GP!!!

Really helpful to integrate training the nursing team, useful reflection discussion afterwards