# Improving associated nursing resuscitation skills, a focus on set up for rapid sequence induction.

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### **Introduction**

Emerging from the pandemic it was noted by new staff members that there were certain HALO procedures (High Acuity Low Occurrence) that they were grossly under confident in. These procedures had been moved to other areas of the hospital during the pandemic where aerosol generating procedures could be undertaken with less impact or risk being posed to other patients.

This improvement project aimed To increase the number of nursing staff within a District General Hospital who have sufficient skills in setting up for RSI by 90% in a DGH ED by June 2023.



Figure 1: Pareto chart of training needs

# Lack of exposure Nervous Poor exposure Scared Uncertain Scared Uncertain Scared Underprepared Stressful Confident Educated Improved Knowledge Organised Reassured Happier Improved confidence Eager to learn more Less anxious Better

Figure 2: Confidence word clouds pre and post teaching and training intervention.

### **Conclusions**

Teaching continues to be a priority in achieving high standards within resuscitation teams and new staff in particular require a structured training program to optimise their training and improve their confidence. Regular training improves confidence and abilities, and sustains team capabilities even when confidence in knocked.

# <u>Methods</u>

An initial survey of staff to establish their confidence in certain resus skills helped identify training needs. A pareto chart was constructed from data analysis of which associated resuscitation skills staff members felt required more training. This showed all staff required training in NIV, which was delegated to a senior nurse, and RSI and Chest drain set up was the next most required training need (figure 1).

Staff were initially asked to think of words they associated with doing a shift in resus and a word cloud was designed (figure 2).

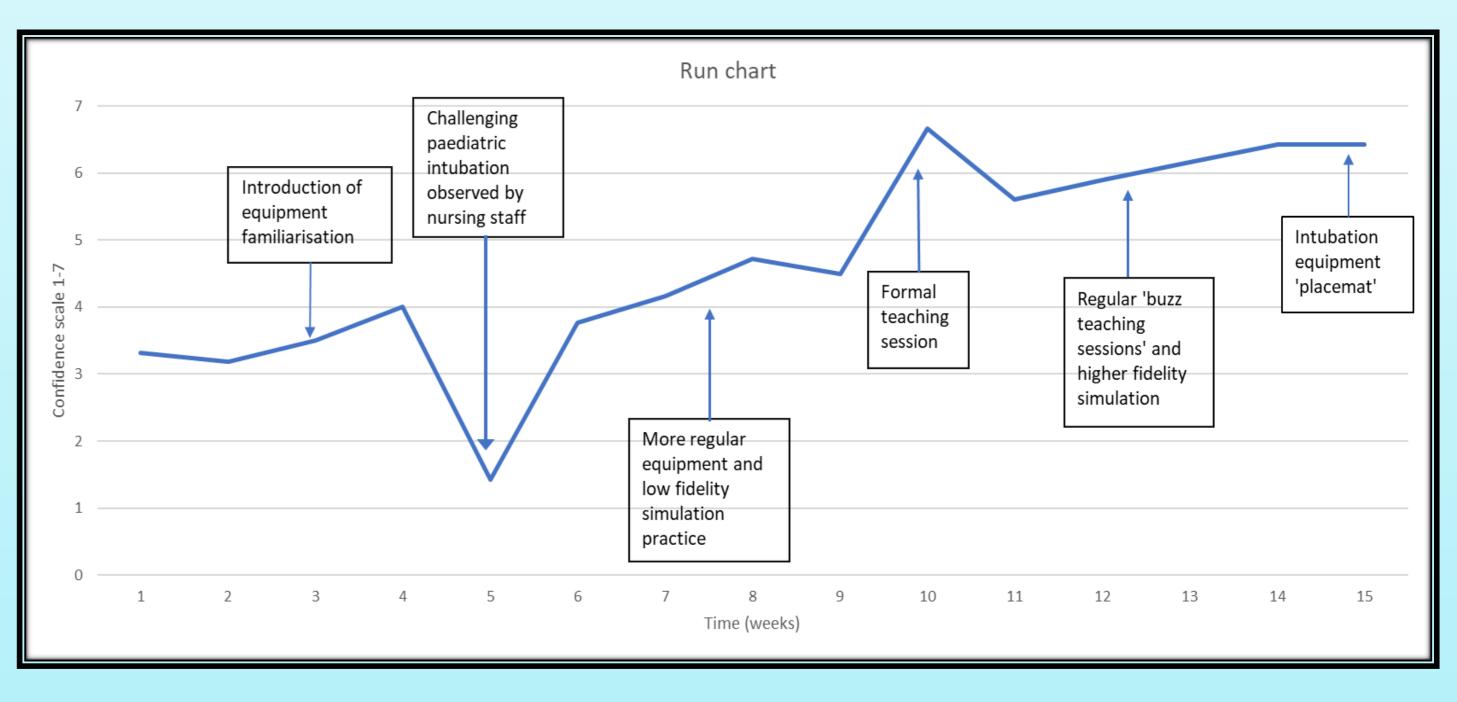


Figure 3: Run chart evaluating the confidence of nursing staff in relation to teaching interventions or experiences of intubation in department over several weeks.

### **Improvement Interventions** •

- Intubation placemat
- Equipment familiarisation
- Simulation training
- Procedure familiarisation •
- 'Buzz' teaching sessions
- Formal and informal teaching

### **Evaluation of change**

The post-intervention word cloud (figure 2) along with the post teaching confidence survey is a good example of how sustained small supportive teaching interventions can have great impact on an individual's confidence in undertaking a procedure (figure 3). The individuals confidence often transfers into the team's confidence, as it is known that when a team is skilled and confident in their abilities they work more efficiently and effectively as a team (1).

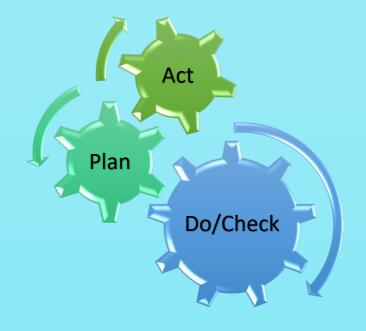
The project aimed to train over 90% of nurses and improve their confidence with the set up for and assistance of intubation which is an ongoing project.

## **Key Learning Points**

Continuous teaching and training of HALO procedures is important for our ED teams to preform at their best, most confident level.

### Next Steps:

- 1. Ongoing associated resuscitation skills teaching
- 2. Developing on the 'blue print' of the current teaching model in a 'scale and spread' format addressing the other training needs as per the pareto chart
- 3. Interdepartmental simulation training utilising learned skillset



### References

1 - Buljac-Samardzic, M., Doekhie, K.D. & van Wijngaarden, J.D.H. Interventions to improve team effectiveness within health care: a systematic review of the past decade. *Hum Resour Health* **18**, 2 (2020). https://doi.org/10.1186/s12960-019-0411-3