The Experience of Multidisciplinary In-Situ Simulation Training in Coombe Women and Infants University Hospital

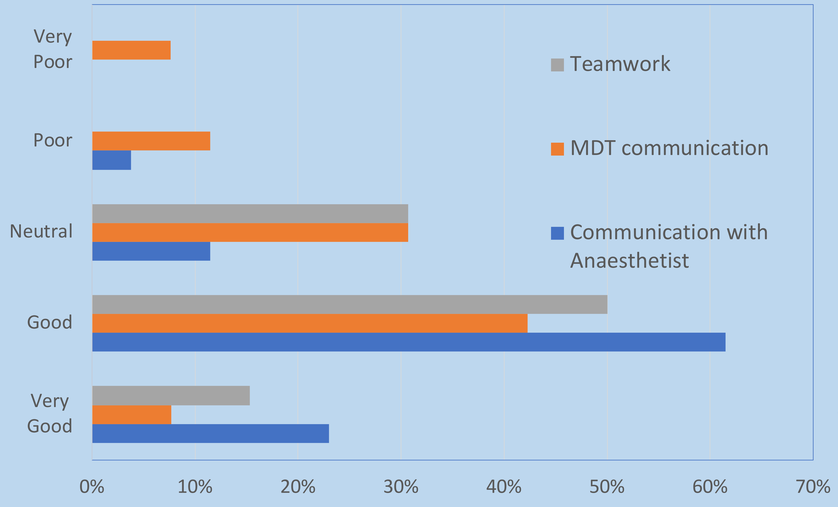
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Introduction:

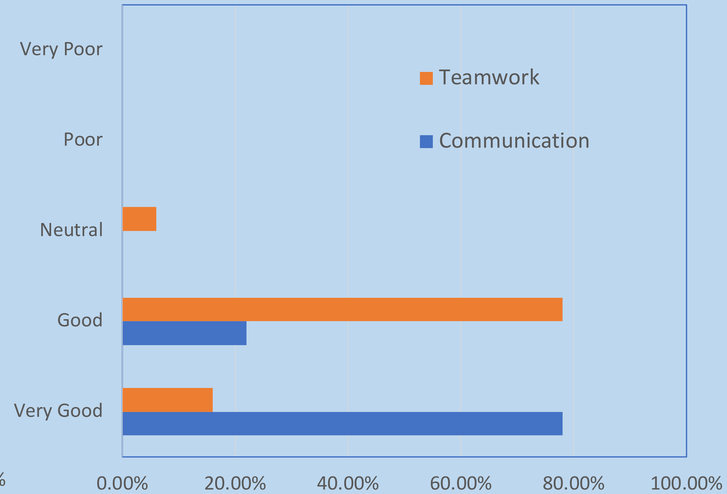
Multidisciplinary (MDT) in-situ simulation has been established for 3 years in CWIUH. Disciplines involved include anaesthesia, nursing and obstetrics. We hope that this training has led to improved patient safety, communication and teamwork. In situ simulation has been demonstrated to improve teamwork and communication during real traumas in trauma teams who had received the *in-situ* simulation training (1).

Method:

The programme was approved by the hospital management and ethics committee. SIM training was performed for 30 minutes every 2 weeks in theatre in the morning prior to clinical work. Data collection was in the form of pre-sim surveys and post-sim surveys. Sim Man 3G was used to conduct obstetric scenarios including PET, Anaphylaxis, LAST, MH and PPH.



Pre-Simulation Survey



Post-Simulation Survey

Results:

26 staff members participated: 4 obstetric trainees, 10 anaesthesiology and 12 nursing staff. Mean years' experience was 4.07.

Pre-simulation survey results were as follows:

- Perception of communication with anaesthetists: very good 23%, good 61.5%, 3.8% poor, 11.5% neutral.
- MDT communication: 7.69% very good , 42.3% good, 11.5% poor, 7.6% very poor,, neutral 30.7%.
- Teamwork: very good 15.3%, good 50%, neutral 30.7%.
- 88% had prior experience with simulation training
- Average anxiety levels were 4.8/10, highest in junior anaesthetists and junior nursing staff without previous simulation experience.

Post-sim survey results were as follows:

- 87% strongly agreed the training was relevant and useful.
- Understanding of the conditions in simulated scenarios improved for all participants.
- All bar one participant felt their confidence in managing the scenario they encountered improved.
- All found simulation to be an effective method to practice communication with colleagues and felt that they will be able to communicate more effectively with colleagues following simulation.
- 90% stated teamwork had improved.

Discussion:

We demonstrate ongoing benefits of in-situ MDT simulation in areas of communication, teamwork and knowledge of local protocols and access to emergency equipment/medications. We hope this training has benefited patients safety in our hospital and improved interdisciplinary communication and teamwork. In-situ simulation training will continue in CWIUH as benefit for all members of the multidisciplinary team has been demonstrated. We will continue to collect data going forward to improve our delivery of in-situ simulation training.

References:

(1) Miller D, Crandall C, Washington C 3rd, McLaughlin S. Improving teamwork and communication in trauma care through *in situ* simulations. Acad Emerg Med 2012;19:608-12.