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Background

Evidence is emerging that demonstrates how learned knowledge, skills and behaviours can transfer from simulation based education to clinical practice. This evidence also relates to improved patient care and outcomes (Cook et al, 2011; McGaghie et al, 2011). Simulation has been shown to allow health professionals to practice clinical skills in a safe and controlled environment before they carry out the procedure or task on a real patient. (O'Connor et al, 2023). For HSCP's, in Occupational Therapy for example, there is a lack of rigorous studies and objective outcome measures for simulated learning (Grant et al, 2021). A simulation laboratory was opened at ULHG in 2022 and is available for practitioners and students to engage in across disciplines. Students have previously been exposed to inter-professional learning events in this lab, around mannequin based simulation. The above evidence and the availability of a simulation laboratory on site, led to the working group of HSCP Practice Tutors in ULHG to pilot a simulation event specific to HSCP PE4 students from the University of Limerick. This event took place in May 2024 with the presence of Occupational Therapy, Physiotherapy and Dietetics students.

Results

Student Feedback Received: 100% of attendees reported improved understanding of inter-professional teamwork and that the simulation experience would help in clinical practice. Also indicated that they would attend a future similar session. Were most engaged and observed skill of decision making primarily in 'family meeting' rehearsal. Identified improved skills and knowledge specific to competencies practiced.

Facilitators: Event was successful, aligned with learning objectives of the placement level and more specific to HSCP learning and development than previous events.

Method & Scenario Design:

Learning Outcomes

- Professionalism
- Teamwork
- Communication
- **No Assessment**

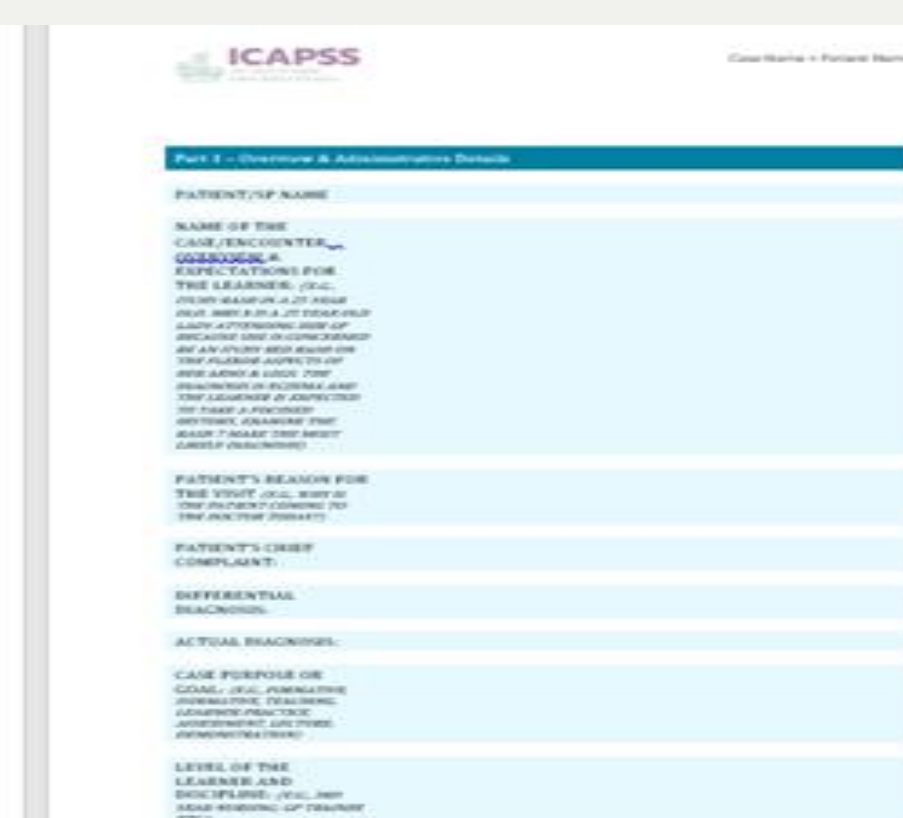
Simulation Format

- ICAPPS Template
- Simulated Patients & Embedded Participants
- Sim Lab & 14 students
- Pre-brief & Debrief

3 Hour Case Design

- Phase 1: Clinical Ward.
Introduction of roles, transfer assessment, delirium screening, Dietetic initial assessment, patient education.
- Phase 2: Family Meeting

HSCP Simulation Case Study - Thursday May 2nd 2020				
08:30 to 11:00				
Schedule: 2.5 hour case study - CERC Simulation & Observation room				
Pre-event meeting:	08:00			
Time/Length	From	To	Description	
00:30	0	08:30	08:30	Pre-Event set up
00:20	1	08:30	08:50	Welcome, students and staff introductions. Facilitator prebrief overview of case study and learning outcomes (SimLab)
00:20	2	08:50	09:10	Simulation Part 1: Physiotherapy & OT (SimLab)
00:20	4	09:10	09:30	Simulation Part 2: Dietetics (SimLab)
00:15	6	09:30	09:45	Facilitate short debrief on performance on teams approach and learning outcomes (SimLab)
00:15	7	09:45	10:00	Break - Move to Tutorial Room 3 post
00:15	8	10:00	10:10	Facilitator prebrief Part 2 case study (scenario) (Tutorial 3)
00:15	9	10:10	10:25	Group Work – discipline specific - map out case, review discipline specific notes (Tutorial 3)
00:20	10	10:25	10:45	Family meeting (Tutorial 3)
00:15	11	10:45	11:00	Facilitate debrief on teams approach and learning outcomes, provide feedback forms



Reflections and Future Implications:

Aligning with Learning Outcomes and Competencies: This will be further defined by planning for future sessions with incorporated input from Academic Partners and Clinical Teams.

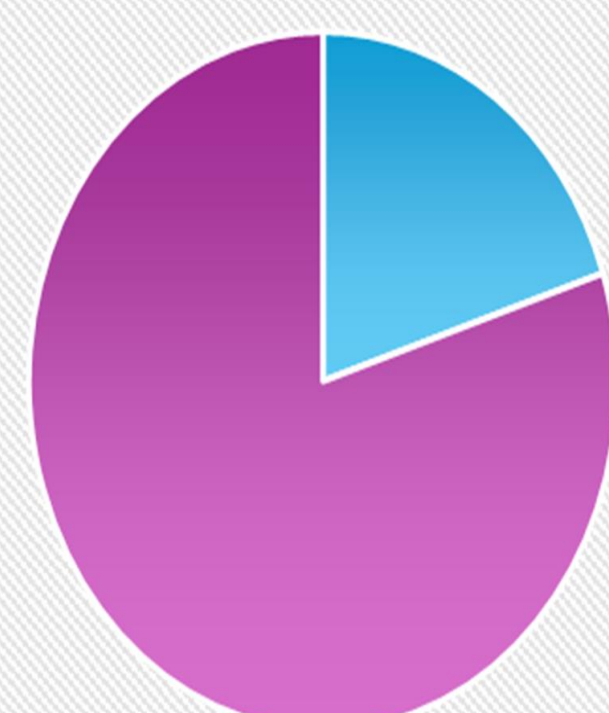
Service User Engagement and Feedback: Necessary to create opportunity for patients and family to contribute to development of future sessions to identify priorities and recommendations

Moving Away From One off Events: Planning for a two part series to enable continuity and increased exposure – PE2 placement: Information gathering and follow up assessment.

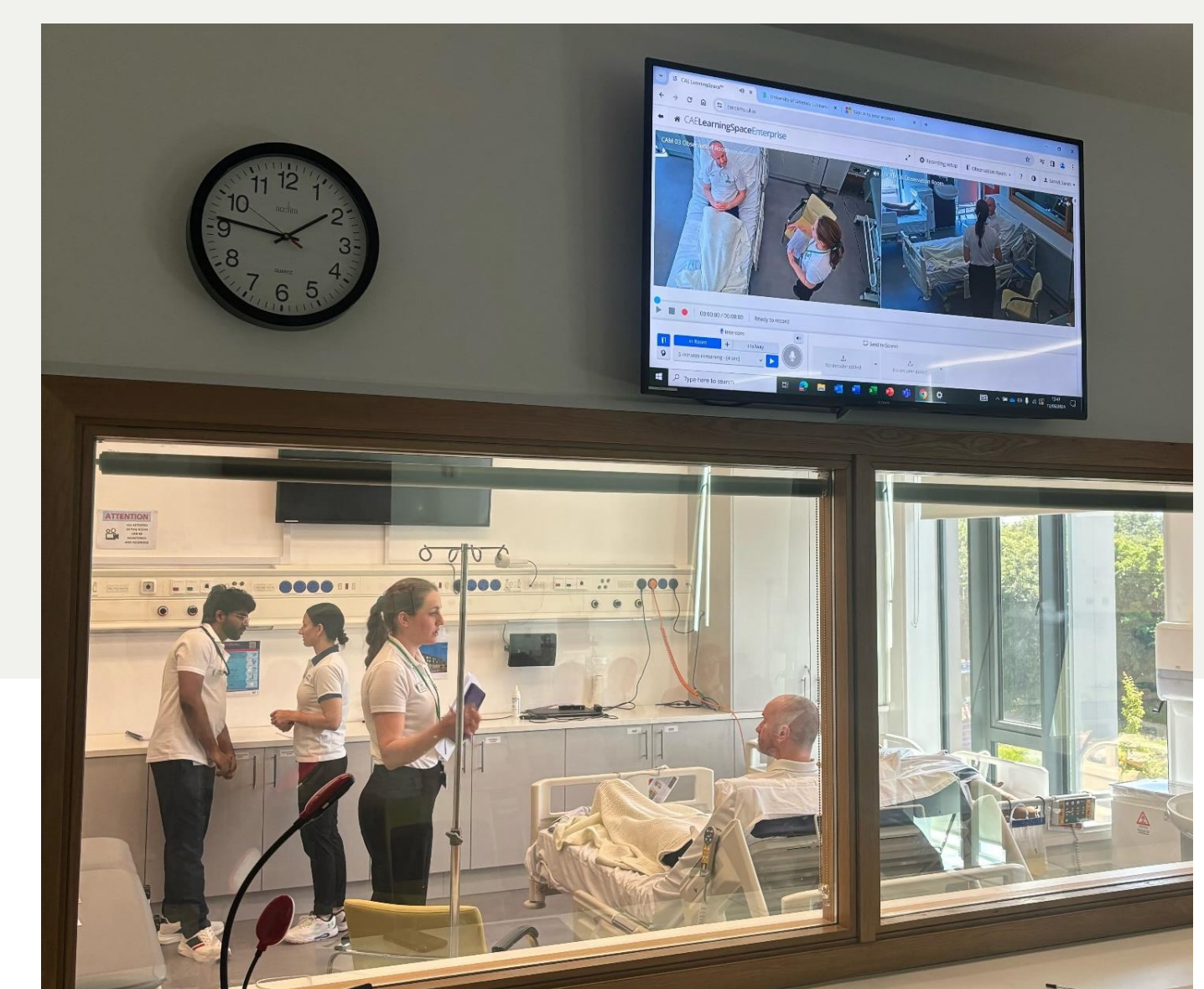
Placement day 1– AHP introductory sessions to manual handling and risk assessment



The session provided clinical experiences that will help me in my clinical practice



- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree



Acknowledgements: Students of the School of Allied Health at the University of Limerick, ICAPPS NUIG, Health Science Academy. **References:** 1: Cook, D. A., Hatala, R., Brydges, R., Zendejas, B., Szostek, J. H., Wang, A. T., Erwin, P. J. & Hamstra, S. J. (2011) Technology-enhanced simulation for health professions education: A systematic review and meta-analysis. *JAMA*, 306(9), 978–988. doi:10.1001/jama.2011.1234. 2: Grant, T., Thomas, Y., Gossman, P. & Berragan, E. (2021). The use of simulation in occupational therapy education: A scoping review. *Australian Occupational Therapy Journal*, 68 (4), 345–356. doi:10.1111/1440-1630.12726. 3: O'Connor, P., O'Dea, A. & Byrne, D. (in press - 2023). A Handbook of Healthcare Simulation. London. CRC Press. 4: McGaghie, W. C., Issenberg, S. B., Cohen, E. R., Barsuk, J. H. & Wayne, D. B. (2011). Does simulation-based medical education with deliberate practice yield better results than traditional clinical education? A meta-analytic comparative review of the evidence. *Acad Med*, 86(6). 706–711. doi:10.1097/ACM.0b013e318217e119.