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## Introduction

- Undergraduate students returning to our district general hospital paediatric department for the 2020-21 academic year were offered a **blended approach** to learning, with **in person** and **virtual** sessions
- We sought to develop students' communication skills by offering a **virtual simulation programme**.

## Methods

- Three one hour online sessions were designed with each session following a simulated patient with common paediatric problems:
  - Coeliac disease and failure to thrive
  - Preschool wheeze
  - Pyloric stenosis

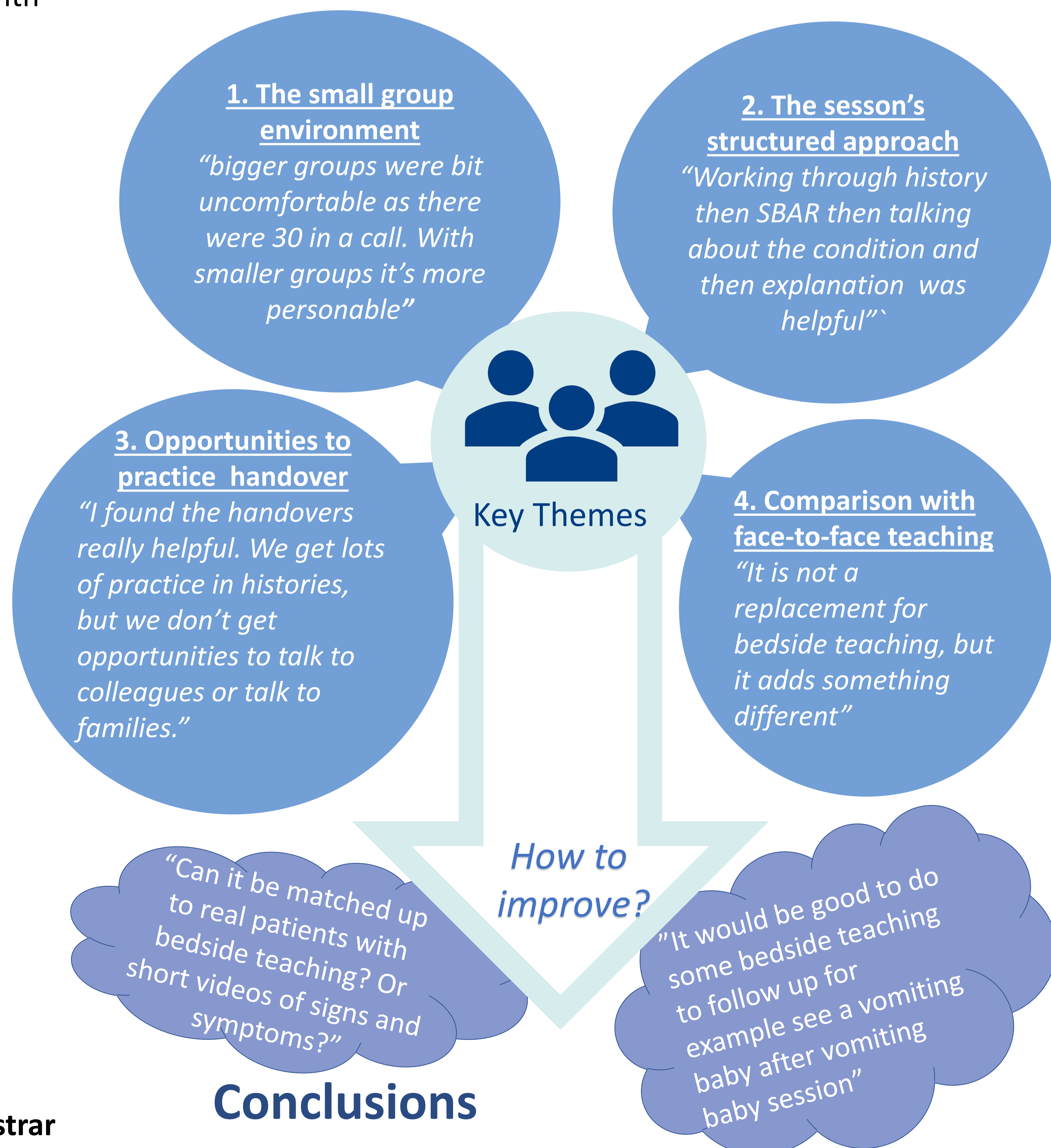
- Each session followed the same structure:

Introduction
<b>Simulation activity 1:</b> History
Debrief
<b>Simulation activity 2:</b> Presentation of patient to doctor
Debrief
Discussion including further information (examination and investigations)
<b>Simulation activity 3:</b> Presentation of patient to doctor
Debrief
<b>Simulation activity 4:</b> Explanation to family
Debrief
Close

- All sessions were **facilitated by a paediatric registrar** (who doubled as an actor)
- Sessions were delivered to **small groups** of medical students (maximum 6 students), with each student actively participating in turn. All students participated in debrief
- Information from feedback forms and focus group were collated and analysed using a thematic analysis approach

## Results

- Students gave overwhelmingly positive feedback.
- The following themes emerged :
  - Praising the small group environment
  - Each session's structure
  - Opportunities to practice handovers,
  - Comparison with face to face sessions
- When asked on ways to improve the programme, students suggested consolidating learning with bedside teaching



## Conclusions

- Our novel virtual communication simulation programme was a welcome addition to our undergraduate education provision.
- It is important that such techniques are used in conjunction with, not a replacement for, learning opportunities with patients.

