

A comparison of trainee satisfaction of simulation courses pre-COVID and post-COVID: What lessons have we learned as teachers?

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Background

The East of England run 2 simulation courses for Level 1 trainees aimed at new ST1s entering training, (ST1 Simulation Day) and ST3s about to progress to Level 2 training (Ready for Reg).

The SARS-CoV-2 pandemic has caused upheaval all over the world, with the introduction of social distancing fast becoming a norm of our every day lives. With regards to post-graduate medical education, this has mostly consisted of online lectures and seminars. Use of these platforms is challenging for simulation as it is likely to be more difficult to suspend disbelief and address human factors - usually the focus of classical simulation training and vital for delivery of high quality, safe patient care.

The social distancing restrictions required re-thinking of the usual programme, calling for more sessions with smaller groups to accommodate all trainees. In addition, the ST1 day was condensed from a 'simulation and skills day', to a whole day of simulation.

Methods

Prior to the pandemic, candidates attending courses run in 2019 were given anonymised pre- and post-course questionnaires to assess their clinical confidence and enjoyment of the course. This was primarily used to improve the current course.

After the introduction of the modifications due to Sars-CoV-2 social distancing restrictions, the same questionnaires were given to all candidates in 2020. Post-course questionnaires were compared between years.

Results

ST1 Simulation Day

From 2019 to 2020, there was an increase in ST1s 'strongly agreeing' with their confidence in managing emergencies (8%) and communication skills and delegating skills (6%). Additionally there was an increase in those 'strongly agreeing' with the usefulness of simulation days (29%) and view of enjoyment of simulation days (32.5%) from 2019 to 2020.

Ready for Reg

From 2019 to 2020, there was a reduction in ST3s 'strongly agreeing' with their confidence in managing emergencies (18%) and communication skills and delegating skills (12%). There was a slight reduction in those 'strongly agreeing' with the usefulness of sim days by 1%, but an increase in enjoyment from 2019 to 2020 of 3%.



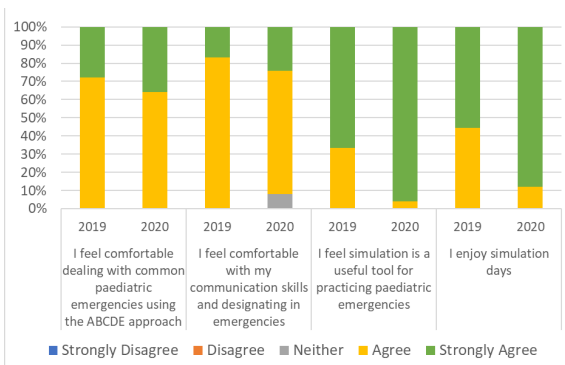
Conclusion

The adaptations made to ensure the simulation courses continued to run during the pandemic were challenging but successful.

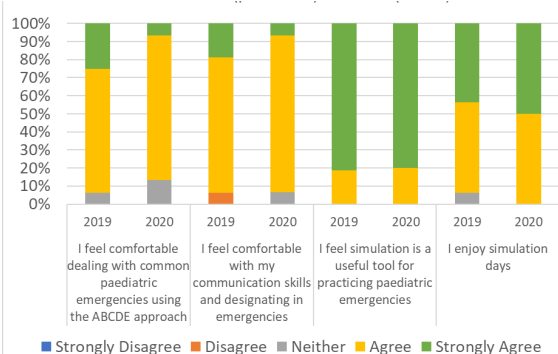
We believe the smaller groups increased the chances of 'leading a scenario' and trainees were more involved in the guided debrief process, a vital part of simulation training which enhances reflection and maximises the learning taken from each scenario¹.

The slight reduction seen in confidence of managing emergencies, communication and delegation of ST3s may be confounded by the upheaval caused by the SARS-CoV-2 pandemic at a crucial point of their career progression. Many had missed training opportunities in the previous 6 months, such as supported leading of emergencies, 'supervised stepping up', and reduced patient load with a significant reduction in the emergency paediatric healthcare utilisation during the pandemic². Nevertheless, the feedback we had was still very positive, and many thanked us for being able to put on the course, despite the pandemic.

ST1 Simulation Day: Comparison of post course questionnaires between 2019 (pre-COVID) and 2020 (COVID)



Ready for Reg: Comparison of post course questionnaires between 2019 (pre-COVID) and 2020 (COVID)



Limitations and Recommendations

The main limitation was that through comparing data pre-COVID and during COVID, we could not account/correct for any underlying anxiety of becoming a new paediatric trainee or registrar in the middle of a pandemic, and the uncertainties that come with this.

It is clear that the SARS-CoV-2 pandemic will be ongoing for some time, and therefore we are in the process of investigating new ways to deliver simulation teaching with tighter restrictions in place, such as online simulation via virtual platforms such as zoom³, Virtual Reality (VR) simulation and computer assisted learning/ E-learning⁴.

References

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