

Brighton and Sussex NHS **University Hospitals**

THE DAY THE SIMULATOR DIED - A PILOT



(1)Brighton and Sussex University Hospital NHS Trust . Brighton, England (2) The Royal Alexandra Children's Hospital. Brighton, England

Background:

Healthcare professionals who are involved with the unexpected death of a child face a dual dilemma in coping with one of the most challenging tasks a professional can ever encounter, compounded by feeling underprepared because it remains an infrequent and sporadic event 1.

An inter-professional simulation day was designed to help prepare learners for being faced with unexpected child death. The day comprised:

- Introductory lectures covering: APLS management of cardiac arrest, local child death guidelines& issues to consider around stopping resuscitation efforts
- Two high fidelity simulation scenarios of unsuccessful resuscitations these included the presence of a simulated parent
- Focused communication skills sessions: breaking bad news & explaining local child death procedures



Immediate feedback was sought on the day A follow up questionnaire was sent 4 months later to explore further the educational value of the day - these are the results presented.

DEMOGRAPHICS OF PARTICIPANTS:

Consultant Paediatrician	1
Level 3 Paediatric Trainees	2
Level 1 Paediatric Trainees	2
Broad Based Training Trainee	1
Paediatric Staff Nurses	3

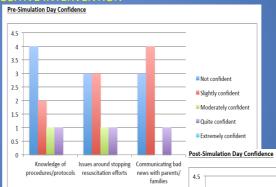
8 out of 9 participants completed the follow up questionnaire The difference in nursing & medical participants reflects the differences in provision of study leave between the groups.

KEY FEEDBACK THEMES:

- Lack of experience 5 out of 8 respondents had never had experience of breaking bad news or had been the primary deliverer of bad news on fewer than 5 occasions
- Lack of formal training 50% had no formal training on child death procedures or breaking bad news
- **Limited workplace exposure** few informal training opportunities
- Simulated parents valuable & increased realism of scenarios

useful"

A POSITIVE INTERVENTION



3.5 Not confident 2.5 Slightly confident Moderately confident 1.5 Quite confident 1 Extremely confident 0.5 Knowledge of Issues around stopping Communicating bad procedures/protocols resuscitation efforts

PARTICIPANTS COMMENTS

I have felt much more when talking to

experience allowed me to help break the bad news to the parents and i felt more confident in the procedures following a child death"

References:

- Harrison ME, Walling A. What do we know about giving bad news? A review. Clinical Pediatrics 2010; 49 (7): 619 – 626.
- Meyer EC et al. Difficult conversations: Improving communication skills and relational abilities in health care. Pediatr Crit Care Med 2009: 10: 352 - 359

CONCLUSIONS:

- Our multi-disciplinary simulation day resulted in increased confidence
- Simulation compliments learning in the workplace & can prepare learners for real patient contact especially for an infrequent & challenging event