lasted between 0 and 2 hours [2]. In this study, we aim to gain a deep understanding of medical students' lived experiences of online Forum theatre (FT) in consulting with DA victims.

Methods: A multi-disciplinary team developed an online FT exercise, which involved a simulated consultation between a GP and DA victim. Spectators are invited to take the place of an actor or guide the actor and decide what action to take, thus helping to change the outcome of the scene. A qualitative approach was conducted, involving hermeneutic phenomenology, to explore participants' lived experience of the FT exercise. Following the online FT experience, medical students were interviewed, and interview transcripts were analysed using a template analysis approach.

Results: Five themes were developed through our analytical process: (1) 'Almost being there…but not quite': the realistic experience of FT; (2) 'Taken on an emotional journey'; (3) 'Opening and controlling a privileged space'; (4) 'Small things matter…': cultivating and maintaining rapport and (5) critically reflecting on future professional self.

Discussion: This study provides an in-depth view of a medical student's experience of online FT. Online FT has the potential to provide a novel DA teaching method for medical students. By providing students with a unique opportunity to step into a GP's shoes in a DA consultation, students can practice how they will handle a DA scenario, without any potential consequences, helping them to improve their consultation skills.

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A CROSS-SECTIONAL STUDY ON THE EFFECTIVENESS OF SIMULATION-BASED LEARNING IN EMERGENCY MEDICINE FOR MEDICAL UNDERGRADUATES IN A LOW-MIDDLE INCOME COUNTRY DURING THE COVID-19 PANDEMIC

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Background: Learning emergencies is a challenge during COVID-19 pandemic for medical students. Managing a real patient in an emergency exposes the medical students and patients to risks now more than ever before. Simulation-based learning (SBL) is a proven safer teaching method to improve technical and non-technical medical knowledge, skills, and to enhance confidence in high-income countries. There is limited literature on the effectiveness of SBL in low-middle income countries (LMICs) [1].

Aim: This study evaluates final-year medical undergraduates' knowledge, skills and confidence improvement through a novel SBL in an LMIC during the COVID-19 pandemic.

Simulation activity outline: Four simulation scenarios were conducted by an instructor to a small group of five to six participants. The instructors were Emergency Medicine Senior Registrars or Registrars, who had prior knowledge in teaching techniques through a formal instructor development course elsewhere. The simulation sessions were based on four

scenarios. A high-fidelity mannequin, basic airway devices, IV access, monitoring devices and a defibrillator were used. Pendleton Model [2] was used for debriefing. A pre- and post-questionnaire was used to assess improvement of knowledge and confidence level of management of the scenario.

Method: Final-year medical students of the University of Colombo were trained on medical emergency care skills and subsequently they were given the opportunity to apply skills in simulation. This course was conducted twice a week, 4-hour sessions, for 6 weeks in March and April 2021. There were four skills stations, including ABCDE assessment, airway management, defibrillation with BLS and non-technical skills. A pre- and post-MCQ was used to assess improvement of knowledge and confidence level on performing each skill. Likert-scale questionnaires were administered before and after each simulation session to assess the level of confidence in performing each task of the simulated scenario. The normal distribution of data was tested with the Shapiro–Wilk test. If the distribution of data was not normal, Wilcoxon signed-rank test was used to compare pre- and post-test scores. Paired sample t-test was used to compare pre- and post-test data if the distribution of data is normal.

Results: All 42 participants experienced SBL for the first time ever. Post-test MCQ score significantly improved compared with pre-test score (p < 0.001). Confidence in skills increased in all 17 domains following the skills sessions in all participants. Confidence to manage cardiac arrest increased in all 10 tasks of the cardiac arrest simulation and the total average confidence score rose from 17.1 (±4.7) to 32.0 (±7.7) after the simulation-based intervention (p < 0.001). Confidence increased significantly in all 12 domains of asthma and anaphylaxis management with the total average confidence score rising from 21.4 (±0.8) to 39.2 (±2.1) (p < 0.001). Satisfaction and attitudes towards simulation-based learning were very positive.

Implication for practice: The course has shown a statistically significant improvement of students' knowledge and confidence in skills with a high level of satisfaction. Therefore, SBL is an effective, safe and feasible alternative to train emergency medicine for the students of LMICs during COVID-19 pandemic.

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SCENARIO-BASED PERINATAL PSYCHOSIS SIMULATION FOR FINAL-YEAR MIDWIFERY STUDENTS: A QUALITATIVE STUDY

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Background: Approximately 20% of women will reach diagnostic thresholds for mood disorders during the perinatal period, and between 0.1% and 0.2% will experience a psychotic disorder [2]. Postnatal psychosis is a dangerous condition with an often rapid onset following a baby's birth. In severe cases, symptoms may include a mother's desire to harm herself or her baby. The midwifery profession reports feeling ill-prepared to provide mental healthcare, and the adequacy of mental health content in training curricula has been questioned. The rarity of perinatal psychosis also means that clinical placement opportunities for student midwives are limited. Scenario-based simulated learning provides one possible solution to this challenge.