

**Method/design:** Three partially scripted scenarios were recorded involving medical, surgical and COVID-19-specific cases. This included intentionally scripted learning points, as well as unintended developments which generated additional learning. These videos were designed to be shown in a virtual setting or limited number group, therefore allowing for continued simulation training during the height of the pandemic. The virtual simulation session involved a moment-by-moment analysis of each scenario facilitated by a faculty member. This allowed for an observer-led debrief and more in-depth reflection.

**Implementation outline:** Most participants gave positive feedback on the perceived quality of this training modality, recognizing its potential to create an engaging environment for learning. There was recognition of its limitations; it cannot replace immersive simulation, however involving service users in the design and implementation enhanced the learning opportunities. The videos created a springboard for discussion encouraging the formation of emergent objectives, including reflecting on behaviours and attitudes. Faculty noted that students were more confident to identify and critique errors as well as challenge poor behaviours when they were not observing a peer. The participants represent a unique cohort of students whose training has been disproportionately affected by the pandemic. We hope that this course has gone some way to address this shortfall.

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## RESEARCH

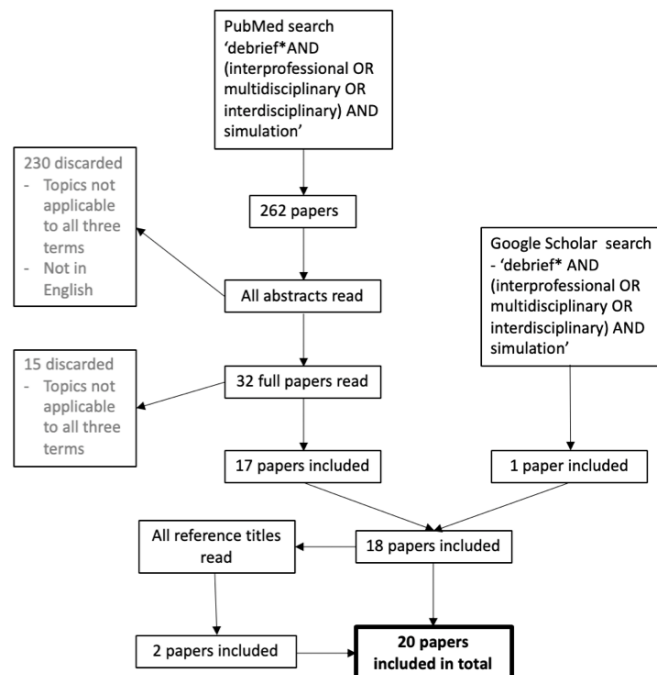
### 31 DEBRIEFING STRATEGIES FOR INTER-PROFESSIONAL SIMULATION

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**Background:** Inter-professional education is becoming more common worldwide and simulation is one way in which this can effectively take place <sup>[1]</sup>. The debrief after the simulation is a critical part of the simulation process <sup>[2]</sup>. There appears to be little research looking into the specific challenges posed by inter-professional debriefing and effective strategies that can be used in this context <sup>[3]</sup>.

**Method:** A literature search (see Figure 1) was performed to prompt discussion around debriefing after inter-professional simulation (IPS) and identify the challenges that this IPS debriefing poses and some potential strategies to overcome these. Gaps in the research were also identified. The papers included were analysed by the authors and key themes were identified.



**Figure 1:**

**Findings:** The results of the literature search included 20 papers from 2013 to 2019. Four themes relevant to inter-professional debriefing identified during analysis were: 'The Debrief', 'Method of Debriefing', 'The Learner' and 'Psychological Safety'. Several challenges around debriefing after IPS have been identified in the literature, including larger groups of debriefers; inter-professional and larger learner groups; multiple debrief tools and psychological safety including hierarchy issues. Potential strategies to overcome them include an inter-professional debriefing team; a lead debriefer; and learner-centred debriefs with a clear structure. Gaps in the research include challenges around having more than one debriefer including around the psychological safety of participants; whether we should be using the same debriefing tools/practices in IPS as well as other forms of simulation; ensuring a balance between inter-professional learning outcomes and individual learner needs; and the effect of hierarchy in debriefing after IPS. **Implications for practice:** Multiple gaps in the research were identified and there is a need for further research in this area to improve our understanding. Identifying firm answers or rules to follow for every debrief is unlikely to be useful, but a framework to consider the challenges and strategies to overcome them may benefit educators in this area.

## REFERENCES

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### 136 POINT-OF-VIEW SIMULATION OF ILLNESS EXPERIENCES FOR HEALTH PROFESSIONS: A SCOPING REVIEW OF THE LITERATURE

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