

Background: Due to the effect of the global pandemic and rising student cohort numbers, simulated practice placements are being implemented into nursing curricula. To deliver simulation-based education (SBE) within the Higher Education Institutions (HEI) staff must be adequately prepared. For SBE to be effective, thoughtful consideration to appropriate staff training is important [1]. A structured unified approach is more beneficial as it sets the same aspirations and contributes to a shared philosophy [2]. This unified approach meant both Health Board and HEI staff were being trained to delivery simulation in the same way, which was new for this HEI. Creating a faculty for simulation emulates a community of practice and also comprises essential networking with other simulationists [2]. It helps support Benner's novice to expert theory as staff start of as novices and subsequently develop emulating that robust educational training for SBE faculty development is essential [3]. Importantly, it addresses quality assurance and governance frameworks in meeting the requirement of the International Nursing Association for Clinical Simulation Learning (INACSL) [3], Association for Simulated Practice in Healthcare (ASPIH), and Nursing and Midwifery Council (NMC) standards. The overall aim of this innovation was to implement a unified approach to faculty development training for academic staff within an HEI.

Methods: Three training sessions were delivered in January and February 2022. HEI staff attended a one-day session. Health Board Simulation Educators facilitated the sessions for the HEI Academic Staff.

Results: Using a unified approach to this faculty development had a positive outcome in supporting HEI staff to be upskilled in the delivery of SBE. It has also resulted in the subsequent development and implementation of a 2-day training course comprising the following sessions: Session 1 – Introduction to clinical skills and simulation and writing learning outcomes and scenarios; Session 2: Technology supporting simulation; Session 3: Preparation, briefing, and debriefing; Session 4: Running an immersive simulation session. This in-house training programme will continue to be delivered to HEI staff undertaking SBE and evaluated.

Conclusion: Using a unified approach enhances the quality and parity of the delivery of SBE within the HEI. A unified approach to faculty development within the HEI will continue to be delivered to upskill staff in SBE. Collaboration with clinical partners in faculty development is crucial in the delivery of SBE to ensure a unified evidence-based approach.

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EXPLODING SILOS: HACKS IN CREATING NATIONAL SIMULATION NETWORKS

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Background: Silos of work are a reality in virtually every large organisation and invariably create duplicated workloads, inefficiencies, and in some cases a sense of 'tribalism' which risks the integrity and effectiveness of teams [1]. As simulation-based education gains traction and momentum as a teaching approach across Scotland and the UK, silos of work have emerged and risk the effectiveness and efficiency of programme delivery. Our aim was to create an effective simulation user network across the 14 Health Boards of Scotland to eliminate silos and create a collaboration of work across the country.

Methods: Thanks to an investment from NHS Education for Scotland (NES), insight from the NHS Scotland Academy, and the expertise of the Clinical Skills Managed Education Network (CSMEN), a team of regional Senior Educators were recruited to create a functional regional and national collaborative for simulation in Scotland. The story here is how the team have come together and the lessons learned in networking, negotiating, and establishing a new and growing sense of collegiately across the country. Starting in the East of Scotland, a questionnaire was designed and delivered across simulation teams and stakeholders across four Health Boards. The data collected was used to feed discussion at an East Scotland Simulation Collaborative scoping meeting which was attended by representatives of all four Health Boards and included medics, nurses, physiotherapists, and pharmacist teams delivering simulation to both undergraduate and postgraduate teams.

Results: An East Scotland Simulation Collaborative has been formally established with its inaugural meeting in Autumn 2023. An online space has been established to promote communication and the sharing of resources, and both a quarterly meeting and annual faculty development day designed for the group. Discussions are now ongoing for the development of an East Scotland Simulation Research group to develop new opportunities to conduct multisite studies for the first time. From a national perspective, North and West Scotland Simulation Collaborative groups are now in their formation stages.

Conclusion: Like weeds in a garden, silos of work will grow all by itself. Like roses in a garden, an effective network takes both time and tending, but the investment pays dividends.

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USING ONLINE SIMULATION TO PREPARE MENTAL HEALTH NURSING STUDENTS FOR PRACTICE

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Background: Demand for mental health nursing staff is rising with a drop-in staff of 8% in the last 10 years [1]. Preparing the future NHS healthcare workforce is therefore a vital component of educational delivery for Higher Education Institutions [2]. With funding Health Education England, the aim of this pilot project was to evaluate whether an

online simulated learning programme helped students feel more prepared for their final placement in practice before qualifying.

Methods: 19 final year mental health nursing students participated in a one-day online simulated learning environment programme which focused on difficult conversations and complex communication scenarios, in partnership with an external organisation. It focused on introducing a bespoke context to develop clinically relevant skills, knowledge, and experience, complementing the range of clinical placements opportunities required by the nurses training curriculum. They were then asked to complete the Human Factor Skills for Healthcare Instrument [3].

Findings: Participants showed a 7% increase in confidence in Human Factors Skills measured by the Human Factors Skills for Healthcare Instrument from their pre-course (M=93.54) and post-course (M=102.27) scores. Participants also showed a 9% increase in scores in the course specific questions relating to the learning objectives from their pre-course (M=50.86) and post-course (M=57.15) scores. We were unable to conduct paired samples t-tests due to the limited number of participants completing both the pre- and post-evaluation survey. Lastly, 100% of participants responded that they would recommend this course to others.

Conclusion: The course is a novel and innovative training method for providing clinical experience to undergraduate nursing students to develop relevant skills and knowledge that complement their placements. The findings demonstrate that participants achieved a variety of learning outcomes including improved confidence in human factors skills and improved confidence across the learning objectives, covering de-escalation skills, working in a multidisciplinary team, identifying mental illness presentation, handover, and referral among other skills. This raft of benefits following training are likely to have a positive impact on interactions with service users or those experiencing mental illness, although further research into this impact would be of great interest.

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'WE ARE THE (SIMULATION) CHAMPIONS – EVALUATING THE ROLE OF SIMULATION CHAMPIONS TO ENRICH THE DIVERSITY OF SIMULATION PRACTICE PLACEMENTS WITHIN HIGHER EDUCATION INSTITUTIONS UNDERGRADUATE HEALTHCARE PROGRAMMES'

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Background: Due to the COVID-19 pandemic, there has been a significant impact on undergraduate healthcare practice placement education [1]. In response, the Scottish Government, committed to ensuring Adult and Mental Health

Nursing, Midwifery, and Paramedic Science students have adequate provision to student placements, awarded Higher Education Institutions (HEIs) funding to develop simulation placements. Within our HEI a Clinical Skills and Simulation Team (CSST) has been created comprising 3 Lecturers, a Simulation Technician, and a Digital Technologist. The team then built a Simulation Champions group (n=30) through fostering working relationships, to help promote simulation-based education (SBE) pedagogy across the HEI. The purpose of this study is to explore whether creating a simulation champions group has any impact on the delivery of simulated practice placements within undergraduate healthcare programmes.

Methods: The Simulation Champions are a diverse group comprised of internal academic faculty and external National Health Service (NHS) partners (such as practice education facilitators) who are passionate educators in SBE. Each external partner has a contact within the HEI, aligned to their area of clinical expertise. Through an agreed Terms of Reference, their aim is to enhance, resource, and assist the delivery of high-quality, high-fidelity simulation placements to students by working collaboratively in line with the relevant professional body standards and proficiencies [2]. The CSST oversee the Simulation Champions, providing strategic direction, leadership, following the HEI strategy [3], and support the delivery of Simulation Placements. The group meets every quarter to discuss simulation practices, explore Continuous Professional Development (CPD) opportunities, and share knowledge and learning. The impact of this team will be measured through staff and student reflection using a framework to objectively analyse scenario diversity, achievement of learning outcomes, and alignment to professional body proficiencies.

Results: Following ethical approval, a group of Year 1 Adult Nursing students (n=60) will have completed a 40-hour Simulated Practice Placement designed and delivered by Simulation Champions (n=10).

Conclusion: This study will then evaluate and conclude whether there is a need to create and develop a diverse, multi-professional Simulation Champions Group before successful Simulated Practice Placements can be achieved. It will also help determine if securing strong working relationships ensures a smooth transfer of knowledge and skills from clinical practice to the simulation setting within a HEI, and if all of this enhances the student experience.

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