

A multi-professional point-of-care (POC) simulation programme that enhances confidence and competence of doctors in training

This page is aimed at people who work in medical education and training. It gives information about the successful introduction of simulation teaching sessions with multi-professional participation.

What is the POC programme?

University Hospitals Bristol NHS Foundation Trust has been running POC simulation teaching sessions since 2010 across the trust. Conducting simulation training with mixed nursing and medical learners is advantageous as nurses and junior doctors naturally work together to deliver care in practice.

Bringing the equipment and expertise of the simulation centres into the clinical workplace enhances the fidelity of the teaching, allows staff to attend (even during busy clinical shifts) and makes it simple to teach multi-disciplinary groups.

How is the programme delivered?

Simulation training offers excellent opportunities for multi-disciplinary, integrated and locally-focused teaching. The faculty and equipment previously based in the Bristol Medical Simulation Centre (BMSC) are now used to run short, simulated scenarios in clinical areas of the trust. The areas of initial focus were the emergency department, intensive care unit and the medical admissions ward.

Sessions are delivered by placing a mannequin in a clinical bed-space that is empty or is between patient occupations. Staff are recruited from the immediate clinical environment and freed for up to 20–30 minutes by cross-covering with colleagues. Doctors present on the wards are invited to join the session and are involved when the nursing staff deem that medical review is appropriate.

The scenarios remain within the bed-space, and the training does not activate the hospital cardiac arrest team or engage other participants from outside the immediate clinical area.

Detailed information

Focus on common clinical scenarios

Scenarios have been written to target common clinical situations, where appropriate and timely intervention is critical, such as patients with a deteriorating clinical condition due to sepsis, hypoglycaemia or other similar problems. The level of teaching is varied, depending on the seniority of staff available for the session.

Ownerships of the programme

As well as delivering monthly teaching sessions in each area, the team have sought to identify local champions and have given them training and support to take ownership of their own branch of the POC programme.

This has allowed different areas to modify the teaching delivered, to make sure it meets the needs of their local multidisciplinary teams, for instance by incorporating critical incidents into training sessions within a few weeks of the incident occurring.

Improved confidence and competency

The sessions have been well received. The team's evaluation suggests that the programme has increased the confidence and competence of medical and nursing staff to manage the various scenarios presented.

Wide potential for adoption

This programme can be implemented wherever there is equipment and faculty capable of running simulated medical scenarios. It is not limited to secondary or tertiary care areas and could easily be adapted to suit primary care or other care settings. The use of a mannequin is not mandatory, and patient actors can be more appropriate in certain areas.

Multi-disciplinary expansion

The programme has been expanded into the delivery suite and post-natal wards, the operating theatres, the Bristol Eye Hospital and various acute medical and surgical wards in University Hospitals Bristol NHS Foundation Trust.

In areas where particular concerns had been identified, the POC programme has been integrated into a larger educational package, including targeted sessions in the BMSC and other quality-improvement interventions.

I want to learn more

For further information, contact Dan Freshwater-Turner at dan.freshwater-turner@uhbristol.nhs.uk.