

Reconnecting with our Junior doctors

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Wessex Medical Educators'
Forum 2017

COMMUNICATION SKILLS SIMULATION TRAINING FOUNDATION TRAINEES IN PSYCHIATRY

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Foundation Programme Director (Community)

Clinical Tutor in Psychiatry

HANKS

- J Hazelgrove, DME, Southern Health NHS Foundation trust
- L McCaughey, DME, Solent NHS Foundation Trust
- S Wilkins, Postgraduate Medical Education Coordinator

TEAM

- P Prevezanos, ST
- o V Brown, CT
- K Willsher, CT
- o C Roper, ST
- L Taylor, CT
- o C Gee, ST
- Q Khurram, ST
- o N Hampton, CT
- K Lloyd, AMH Manager
- o J Drake, OPMH Liaison Nurse

FY TRAINEES: PRE AND POST PLACEMENT FEEDBACK

| Expectations | Number of responses | | |
|---|---------------------|--|--|
| | Pre-placement | Post-placement | |
| Improving communication skills in difficult circumstances | 6 | Less reluctant to engage in complex discussions (X2) More confident in talking to patients and relatives I am going to be able to apply it to other clinical settings (X2) | |
| Learn about MDT working | 3 | Learnt to work with MDT/ nurses MDT staff are very skilled and I have learnt from them Pharmacists have been very useful in learning about psychotropics (X2) | |

ARKET RATE

Total cost of package and payment details:

- otal for programme excluding stage four will be: £16,239.00
- otal for entire programme including stage four will be: £19,239.00
- Please raise a purchase order with for the above value to:
 - audsley Simulation
- outh London and Maudsley NHS Foundation Trust

IMS

To provide opportunity for FY trainees in psychiatry to practice communication skills using simulated scenarios

To complete self-assessment pre and post training

METHOD

- All FY trainees in psychiatry across SHFT, Solent and IoW were invited to take part in simulation training.
- Communication skills were assessed using 6 scenarios involving conversations with patients, relatives, senior psychiatrist, colleague from medical hospital and other health care professionals.
- Each scenario was for 15 minutes for FY2 trainees and 10 minutes for FY1 trainees.
- There was collective feedback for 15 minutes at the end of circuit, followed by 5 minutes of individual feedback (6X5 minutes) per scenario.
- FY trainees had to complete self-assessment of their communication skills pre and post simulation training as well as to provide feedback about simulation training course.

SCENARIO

- INSTRUCTIONS FOR CANDIDATE:
- You have been asked to speak to an angry, and upset relative of one of your patients who died last night on the dementia ward. Although there was a DNA CPR form in place, Mildred received around ten minutes of CPR from the agency staff member who found her. This allowed time for the nurse to confirm her DNA CPR status. As far as you are aware, the nurses had phoned the family as soon as was practically possible.
- At this time you are not sure of the cause of Mildred's death. Although she was agitated and anxious on the ward, and would hit at staff on occasion, she was also very frail, and her oral intake was so poor that she has been receiving sub-cut fluids from time to time to try and keep her hydrated. She had a mild anaemia, and a triple cardiac bypass many years ago.
- The relative is aware of the death, and angry that Mildred received CPR against her wishes. Please address these concerns.

CENARIO

Instructions to candidate:

You are the doctor on-call. You have just completed a patient assessment and handed over to you Consultant who is off-site. You receive a phone call from the nurse manager who tells you to call the other ward you are covering immediately. They have been trying to contact you for an hour as they have no PRN medication prescribed for a patient. The SpR that usually covers the ward is on study leave.

You have <u>15 minutes</u> to discuss the situation with the Senior Ward Nurse and make a management plan over the phone.

Self-assessment – Pre & Post Simulation Training

| I am confident in | Average from 17 participants | |
|---|------------------------------|----------|
| (Possible score range -2 to +2) | Pre-SIM | Post-SIM |
| Assessing for presence of mental illness | 0.64 | 1.05^* |
| Interpreting assessment for mental state | 0.64 | 1.00* |
| Applying assessment towards formulating risk assessment | 0.53 | 1.23* |
| Management of challenging behaviours | -0.06 | 0.88* |
| Ability to stay within limits of my expertise | 0.76 | 0.94 |

Self-assessment – Pre & Post Simulation Training

| I am confident in | Average from 17 participants | |
|---|------------------------------|----------|
| (Possible score range -2 to +2) | Pre-SIM | Post-SIM |
| Ability to communicate and work effectively with team members | 1.18 | 1.11 |
| Demonstration of respect for skills, contributions and opinions of others | 1.00 | 1.11 |
| Demonstration of a good understanding of clinical priorities | 0.70 | 1.05^* |
| Responding appropriately to requests when on call | 0.59 | 0.88* |
| My behaviour, in accordance with contemporary standards of practice | 0.94 | 1.00 |

THEMES FROM PERSONAL REFLECTION

I need to improve in:

- Difficult conversation with patients and relatives
- Managing challenging behaviours including assertiveness/ de-escalation
- Prioritisation
- Risk assessment
- Mental State Examination
- Structured history taking

I have improved in:

- Having difficult conversations with angry patients/ relatives
- Managing challenging behaviour including deescalation
- Risk assessment
- Keeping to structure
- Being empathetic, responding to concerns raised
- Respecting opinions and skills of other healthcare professionals
- Introducing/ summarising

COURSE EVALUATION

| COULDE L'ALLOTTION | |
|--|--------------|
| eflection on Simulation Training | Average |
| Possible score range-2 to +2) | from 17 |
| | participants |
| | |
| he scenarios reflected situations that I have been in | 1.12 |
| found it hard to assess simulated patient | -0.35 |
| found it hard to provide plan to nursing manager | -0.52 |
| | |
| received some useful feedback about my own performance | 1.71 |
| think that FY trainees in psychiatry would benefit from this | 1.76 |
| ype of course | |
| think that all FYs irrespective of psychiatry placement | 1.71 |
| hould have to take part in communication skills training | |
| will now feel more able to assess and manage problems that | 1.65 |
| rise in psychiatric settings | |

ONCLUSIONS

- Over all trainees strongly felt being more able to assess and manage problems that arise in psychiatric settings and would recommend communication skills training to FY trainees in psychiatry and across all other clinical specialties.
- Broaden involvement of FY trainees by including all FY trainees in psychiatry placement across Wessex Deanery and to consider building communication skills simulation training for all FY trainees

HARING OUR WORK

'Psychiatry and Simulation-based Training in the Foundation Programme - A Development Day' event — Royal College of Psychiatrists (Presentation by V Brown, CT)

Wessex Medical education Conference (Poster by P Prevezanos, ST)

Submitted for Annual Congress of RCPsych, 2017



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