

A PANTS DAY...

Wessex School of Surgery Human Factors Team

AIMS OF THE WORKSHOP

Understand what non technical skills (NTS) & human factors are and the differences

Have an idea about how to plan a NTS based simulation

Take home some tips on the priorities of planning and preparing such scenarios, and how to avoid pitfalls

HUMAN FACTORS

ERGONOMICS

**NON TECHNICAL
SKILLS**

**HUMAN – MACHINE /
ENVIRONMENT
INTERACTION**

**HUMAN - HUMAN
INTERACTION**

**SYSTEMS DESIGN; EQUIPMENT
DESIGN; ORGANISATION
ENVIRONMENT; PHYSICAL
ENVIRONMENT**

**TEAMWORK; DECISION MAKING;
SITUATION AWARENESS;
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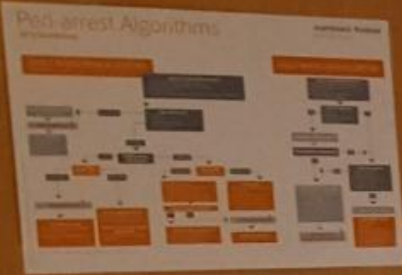
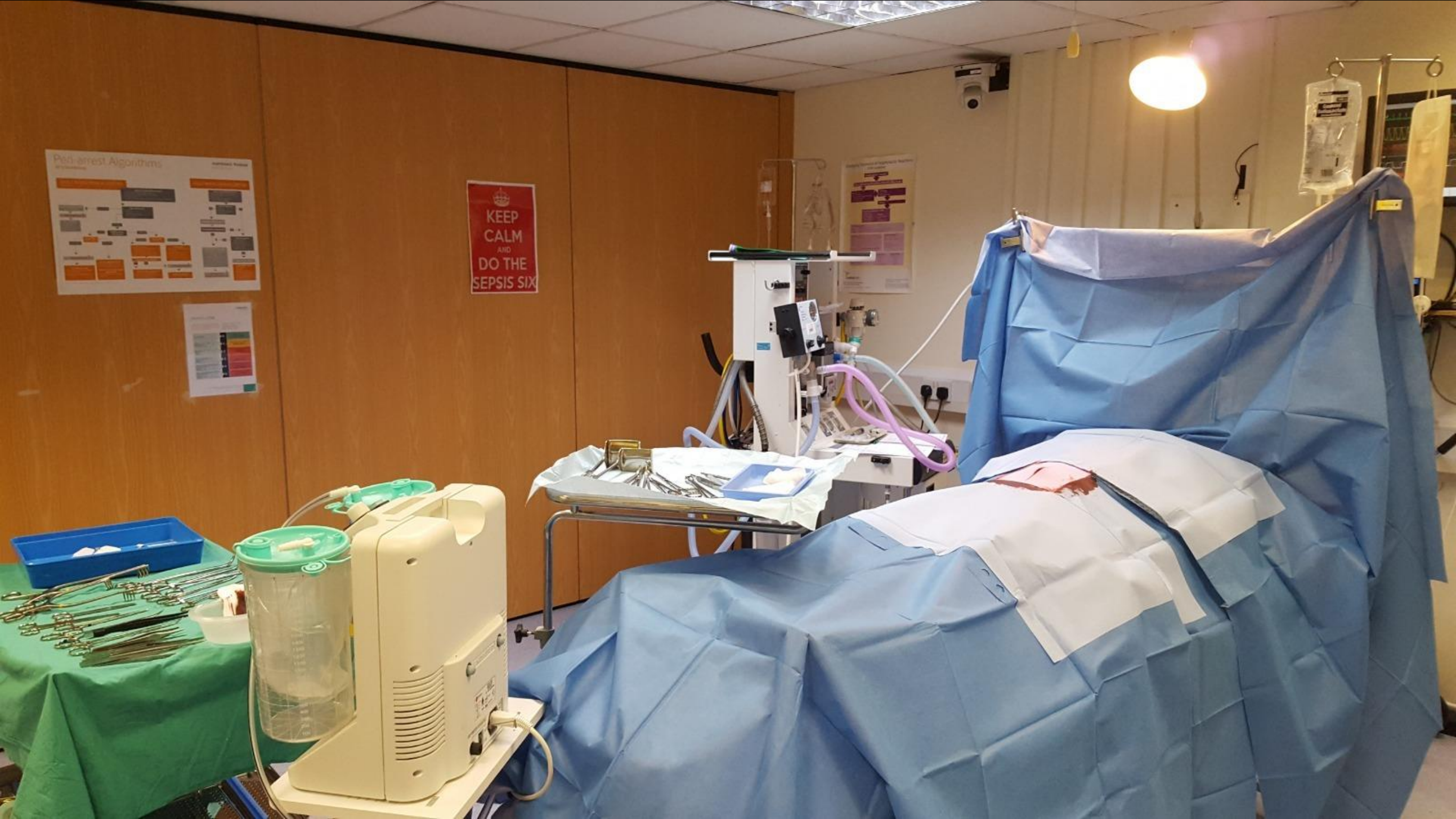
WHAT IS PANTS

Practical Application of Non Technical Skills

Based on a day in the emergency theatres allowing the course to be multi-specialty / pan surgical

Full course run 4 times plus a number of shorter versions

An example scenario involves a candidate fixated on a task and subsequently not appreciating the deterioration of the patient



KEEP CALM AND DO THE SEPSIS SIX



GROUND RULES

The single biggest problem in
communication is the illusion that it
has taken place

George

Bernard Shaw

We will be asking you to provide feedback
to each other; please respect each others
confidence

SIMULATION SCENARIO PLANNING

Please get into groups and with the simulation scenario planner sheets provided, start to put together a plan for a non-technical skills based scenario

Have a think about situations that you have experienced at work – where errors or near misses have occurred with a NTS element

One of us will join each group to facilitate discussion and answer any questions





SCENARIO DISCUSSIONS

We would like each group to present an outline of their scenario, to be followed by discussion and feedback from the other groups and the facilitators

WHAT HAVE WE LEARNT...?

- Start with some ground rules and plan these carefully
- What is the point i.e. the learning objective of your scenario? You need to be really clear on this when planning it
- The learning objective should be emphasised during debrief
- Keep the scenario simple – especially clinically; the aim is not to run a resus or trauma scenario
- All scenarios should be as realistic as possible and run in real time
- Candidates and ideally faculty should ‘be themselves’ – avoid role play where possible

WHAT HAVE WE LEARNT...?

- Don't plan too many scenarios in one day, we tend to run 4 main ones and 2 'mini' ones
- Consider your learners and adapt the scenario for them
- Most of the learning occurs during the debrief – allow a LOT of time for this
- This also means that it doesn't matter if not all candidates are directly involved in a scenario
- The debrief almost seems to be like therapy for candidates – many of them have never had an opportunity to discuss similar situations they have experienced
- A high faculty to candidate ratio really helps

WHAT HAVE WE LEARNT...?

- Keep the feedback direct and specific, then move on to general debrief and discussion
- Embed faculty within the candidates who are observing the scenario, to facilitate discussion
- Location – just need an appropriate space
- Money – thinking about costs and payment logistics
- Fidelity
- Equipment



any questions?

TEAMWORK

A group of people working together to achieve a common goal

Think about the skills mix available

Planning and prioritisation

Role / task allocation

Identify people by name

Co-ordination and oversight

Balancing risks

Support the team to share an understanding of the situation, reach a joint decision and then once the plan is communicated clearly, coordinate the response of the team to implement the necessary actions – with a backup plan available if needed