

**Describe your idea,**

your ‘lightbulb moment’...

**We knew simulation would play a vital part in preparing and**

**upskilling staff at pace to care for patients with COVID-19.**

**Approached by one of our Sim Faculty Consultants, who wanted to film**

**RSI procedure to have as a resource to educate large volumes of staff.**

**This led to the SIM team developing fast pace ‘reactive’ training workshops. This included donning and doffing PPE, RSI team sims, cardiac arrest sims and point of care simulations caring for deteriorating patients with COVID-19 in various areas of the Trust from ED, ITU, Paeds, Maternity and RCU/AMU.**

Describe the

**results** of your changes...

the benefits to the patient, the service/team

**Staff felt more confident with regards to managing patients with COVID-19 after**

**SIM training. It enabled teams to**

**practice together, highlight latent**

**threats and also influence SOPs.**

**Key departments were able to plan and**

**construct environments effectively in**

**preparation for admitting COVID-19 patients.**

**Highlighted the value of having a simulation service.**

**All of the above can influence patient safety by reducing risk and ensuring the care we deliver**

**is safe and effective.**

Is there anything else to improve or something you couldn’t get done this time? *(Your next lightbulb moment)*

**Recognising that simulation based education can be valuable in identifying latent threats and facilitating a ‘run through’ of how care can be delivered in un familiar environments. We requested some investment in new simulation kit after it had been used on multiple occasions for airway training and CPR, but were not successful, improving our kit will ensure we can continue to deliver a reactive robust service for the Trust. Training is still ongoing with regards to COVID-19, supporting staff in clinical practice by facilitating bespoke study days such as tracheostomy training and on-call bleep events for FY1s.**

Next time...what would you do **differently** or what **advice** would you give to others?

**Although we obtained feedback from each session, it would be useful to obtain feedback a couple of months after the event and see how the training has influenced clinical practice for various staff members.**

**Start date March 2020. Finish date : On going!**

Describe what you **enjoyed** and

what **surprised** you...?

**How many people we were able to get through simulation training sessions!**

**We managed over 420 staff in a month!**

**It was fantastic to be part of such a passionate, enthusiastic team and get some**

**amazing feedback from participants.**

*Plan SMART: Specific, Measurable, Achievable Realistic, Timescale*

**Who** was on your dream team and which department/ ward/area are you from?

**The Simulation Team. Claire Levi and Colin Kuberka.**

**Our Sim Faculty, Ben Siggers, Nicola Finneran, James Haslam, Scott Murgatroyd, Jim Baird, Annabel Harris, Gail N, Xantha Holmwood, Hannah Rickard and many more!**

In responding to COVID-19 what did you need to change and why?

**Needed to re-structure our training schedule and set up fast pace simulation training to meet the needs of staff within the Trust.**

Who did you need **help** from? (Managers/ other depts.)

**Ward Leaders to support the training at the point of care and facilitate releasing staff.**

**Also we worked with other key stakeholders such as Debbie Fishlock from Resuscitation.**

**How** long did it take? (It might be hours/ days/ months)

**Probably days to initiate and the fast pace training sessions were delivered over 3-4 weeks.**

*The five W’s, who, what, when, where, why*



***Extra details on this side if you need more space...***

***What next?***

**Keep** a copy for your personal annual appraisal

**Give** a copy to your manager for your department’s collection of lightbulb moments

**Send** a copy to the PMO (Project Management Office)