

of their unique 'first-hand' experiences. A small purposive sample of clinical nurse educators who facilitated IPSBE was recruited to take part in semi-structured interviews. Data were inductively analysed using a systematic, step-by-step approach, generating meaningful themes and concepts that can be applied to the context of practice [3].

Results: Four master concepts were derived from the interpretative analysis of the interviews: 'looking at things through a different lens'; the centrality of the debrief; 'we are actually learning all the time' and personal and professional growth. It was evident from the interviews that the clinical nurse educators learned from the participants and fellow faculty members when facilitating IPSBE. There was a recognition of the significance and importance of working, learning and teaching together. IPSBE creates a safe space for learning that promotes an opportunity for shared learning to occur which can positively influence inter-professional relationships and practices, which can influence patient care and safety. In addition, the clinical nurse educators expressed that their experiences had enabled them to develop a deeper insight, understanding and respect for educational theory that underpins adult learning which has been transformational to their teaching practices.

Conclusion: IPSBE creates a safe space for learning that promotes an opportunity for shared learning amongst faculty to occur which can positively influence inter-professional relationships and practices. These positive team-based behaviours are transferable to educational and clinical practice. The detailed analysis and interpretation of the research findings led to recommendations for practice, education, policy and research.

Ethics statement: Authors confirm that all relevant ethical standards for research conduct and dissemination have been met. The submitting author confirms that relevant ethical approval was granted, if applicable.

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CONTENT

A8 MENTAL HEALTH PROFESSIONALS' LIVED EXPERIENCES OF SIMULATED LIGATURE TRAINING: A PHENOMENOLOGICAL STUDY

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Background and aim: Ligature and death by hanging represent critical issues in nursing practice that necessitate ongoing vigilance and assessment from healthcare practitioners [1-3]. This study delves into the lived experiences of healthcare professionals participating in a simulated ligature training and management workshop at a London university. The phenomenological research aims to offer an in-depth

comprehension of the benefits and challenges associated with employing a simulation-based approach to ligature management training for mental health care professionals.

Methods: A purposive sample of 10 healthcare professionals working in in-patient settings were invited to partake in a 2-day simulation-based ligature management workshop. Participants were aged 18 years or older and were able to provide written informed consent. Qualitative data were gathered following the 2-day simulation workshop through audio recordings and verbatim transcriptions, which were subsequently thematically analysed and interpreted by the research team.

Results: Thematic analysis of in-depth interviews unveiled three principal themes: (1) transformative experience, (2) altered perspectives on ligature training, and (3) patient-centred risk management and empowerment. The study offers valuable insights into the lived experiences of healthcare professionals within a simulated learning environment, contributing to a more profound understanding of effective training strategies for handling ligature-related situations in clinical practice.

Conclusion: The findings indicate that simulation-based training can bolster the competence, resilience and preparedness of mental health professionals in managing ligature-related situations. Moreover, involving patients in devising their own risk management plans and delivering individualized care can result in improved patient outcomes and diminished staff burnout. This study sheds light on effective training strategies for mental health professionals in tackling complex and challenging circumstances in mental health care.

Ethics statement: Authors confirm that all relevant ethical standards for research conduct and dissemination have been met. The submitting author confirms that relevant ethical approval was granted, if applicable.

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TECHNOLOGY

A9 IMMERSIVE TECHNOLOGY EXPERIENCE MEASURE (ITEM): PILOT STUDY ON PARTICIPANT EXPERIENCE USING NOVEL QUESTIONNAIRE AND VR SCENARIO

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Background and aim: A scoping review identified a significant growth in research with immersive technology in healthcare education. However, there are few validated measures that capture the user experience of participants [1]. This study aims to investigate the use of an immersive virtual reality (VR) simulation on sepsis management and measure user experience using a validated tool, the Immersive Technology Evaluation